

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

PTSF Standards of Accreditation

Tracking and Calculating Trauma Multidisciplinary Peer Review Meeting Attendance

Summary of Standards

Standards of Accreditation
ADULT LEVELS I-III

Rev. 01.01.21



Standards of Accreditation
ADULT LEVEL IV

Rev. 01.01.21



Standards of Accreditation
PEDIATRIC LEVELS I-II

Rev. 01.01.21



Standard 6: Performance Improvement & Patient Safety (PIPS) Program

12. A multidisciplinary forum for (PIPS) Peer review focus is required.

- A. The following aspects will be addressed and trended: deaths, transfers, morbidities, (PIPS) issues, systems issues, clinical management guideline issues, and provider specific issues- including specific morbidities and mortalities.
- B. The goal of this meeting is to have robust case discussion among multidisciplinary peers. The following participation is required:

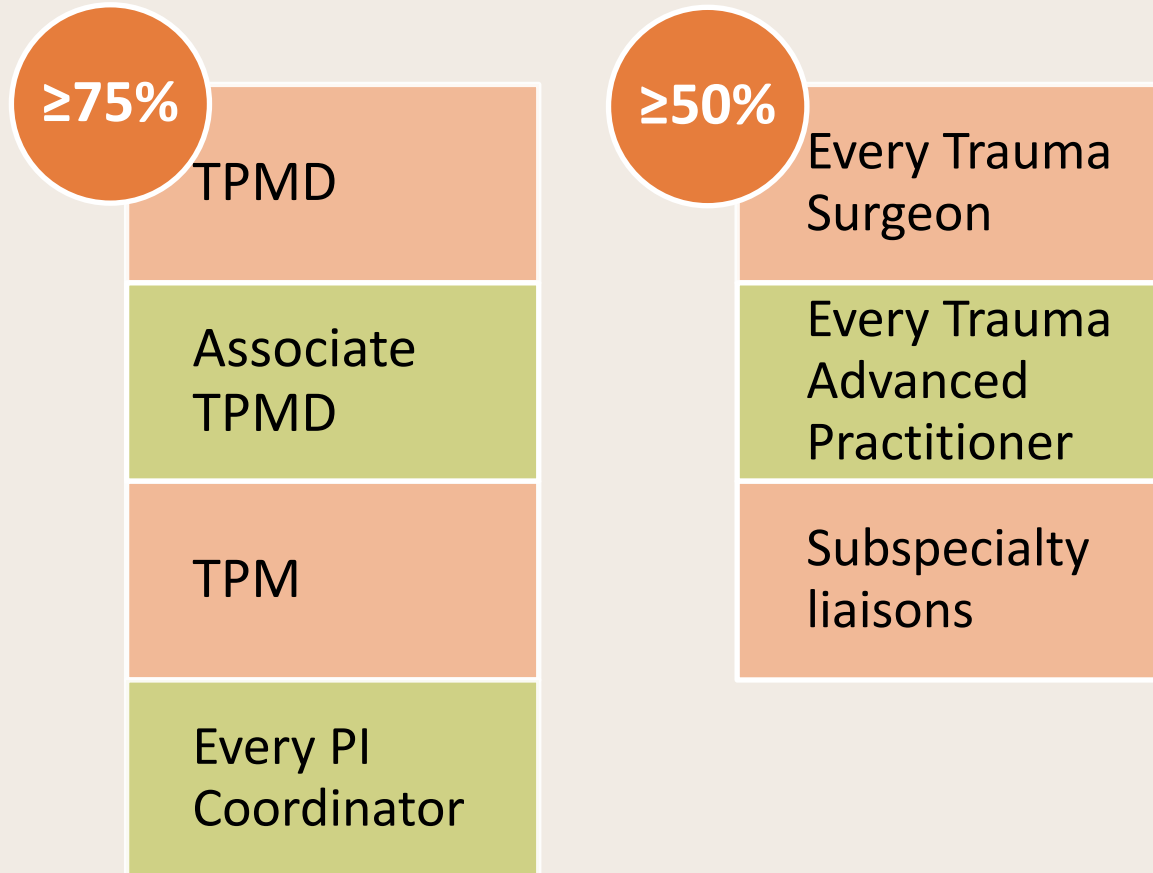
- i. The TPMD, in collaboration with the TPM and Trauma PI Coordinator, will have the leadership role.
 - a. The TPMD must chair this meeting.
 - b. The TPMD, TPM and PI Coordinator must maintain 75% attendance.
- ii. All General Surgeons participating in trauma care must participate.
 - a. General Surgeons must maintain 50% attendance.
 - b. The TPMD must ensure that general surgeons who miss the meeting receive and acknowledge the receipt of critical information generated.
- iii. All Advanced Practitioners supporting the general surgical team and having a defined role in trauma care must participate.
 - a. AP's must maintain 50% attendance.
- iv. Subspecialty liaisons must include:
 - a. Anesthesia
 - b. Emergency Medicine
 - c. Critical Care – If critical care unit is not independently directed by a surgeon (I/II)
 - d. Neurosurgery (Required for Level I and II; Only if applicable for Level III)
 - e. Orthopedics
 - f. Radiology
 - g. Additional subspecialists as defined by the PIPS plan.
- v. The Subspecialist Liaisons must
 - a. Maintain a minimum of 50% attendance.
 - This attendance benchmark may be met by the liaison and/or a second identified representative of the Subspecialty Group.
 - o If this role is shared, both participants must meet the CME requirements.
 - Fifty percent is the actual attendance rate and does not include excused absences or other reasons for nonattendance.
 - Attendance must be monitored on a continual basis.
 - b. It is the responsibility of the liaison to communicate critical information to the subspecialty group.
- vi. In Trauma Centers with both an Adult and Pediatric Accredited program, there must be a representative (TPMD or Designee) from the adult/pediatric program attend the other program's meeting, and ensure dissemination of communication is sent to the other panel members.
- vii. Peer-review meeting attendance may be waived / pro-rated for military deployment, medical leave and missionary work. The center must provide documentation to support the excused absence. Vacation, patient care, illness and contracted-but not working that month, are not excused absences and may not be prorated. TPMD/Liaison providing a review of the meeting minutes to the absent provider cannot be counted as attendance at the meeting. Per Diem providers, providers rotating from another hospital, and Locum Tenens providers may not have attendance expectations prorated based on amount of call taken.

C. Meeting minutes and attendance log must be maintained.

D. Meeting must be scheduled at regular intervals to assure that the volume of case review can occur in a timely fashion.

E. Attendance may be met through teleconferencing and/or videoconferencing as long as it facilitates active participation.

Standards Regarding Attendance



Required Subspecialty Liaisons

	Level I	Level II	Level III	Level IV
Emergency Medicine	✓	✓	✓	✓
Radiology	✓	✓	✓	✓
Orthopedic Surgery	✓	✓	✓	If involved in trauma care = ✓
Anesthesia	✓	✓	✓	If involved in trauma care = ✓
Neurosurgery	✓	✓	If involved in trauma care = ✓	If involved in trauma care = ✓
Critical Care	If ICU not independently directed by a surgeon = ✓	If ICU not independently directed by a surgeon = ✓		
Adult Trauma Surgeon	At Pediatric TC if hospital has an adult program = ✓	At Pediatric TC if hospital has an adult program = ✓		
Pediatric Trauma Surgeon	At Adult TC if hospital has a pediatric program = ✓			

Subspecialty Liaisons

- Can assign a Primary Liaison and Secondary Liaison
 - Both must be physicians
 - Only Level III & IV can assign a CRNA as the Secondary Liaison for Anesthesia
- Attendance benchmark can be met by combining the 2 liaison's attendance
 - Only count if either subspecialty liaison attended each meeting
 - Cannot count as 2 attendance if both attend the same meeting
- A liaison must always be identified; Prorating should not be needed

Excused Absences

- Only 3 allowed:

Military deployment

Medical leave

Missionary work

- Documentation to support the excused absence is required
- Attendance can be prorated for these 3 indications

Not Excused Absences

- Vacation
- Patient Care
- Illness
- Contracted but not working that month
- Attendance **cannot** be prorated for these indications

Also Note...

- TPMD/Liaison providing a review of the meeting minutes to the absent provider cannot be counted as attendance at the meeting
- The absent provider watching/listening to a recording of the meeting cannot be counted as attendance to the meeting
- Attendance may be met through teleconferencing or videoconferencing as long as it facilitates active participation

Per Diem/Rotating from Another Hospital/Locums Trauma Surgeons/APs

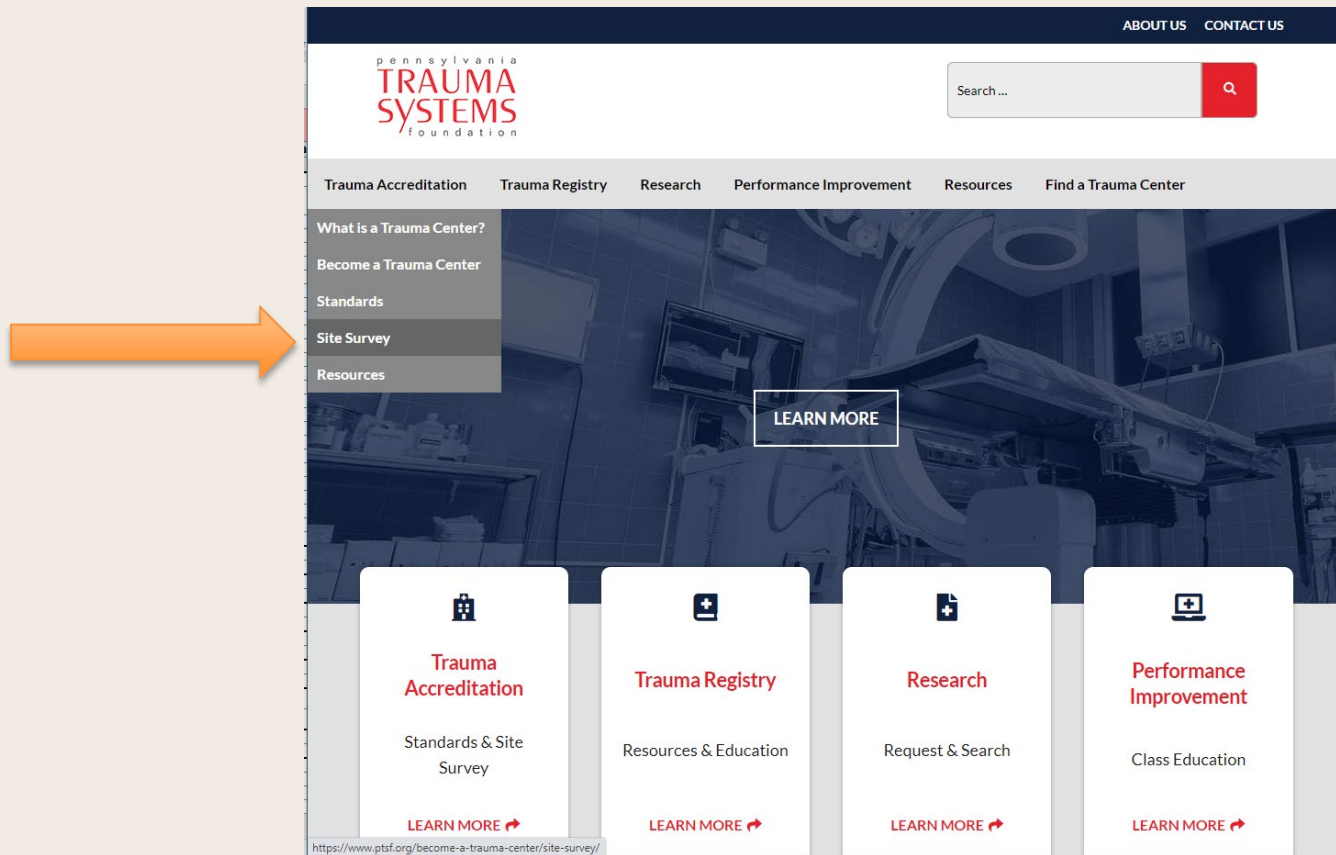
- Same expectations as Trauma Surgeons/APs
- Attendance expectations are NOT prorated based on amount of call taken or employment status
 - Not working in a month does not absolve the provider from needing to attend the meeting
 - 0.1 FTE and 1.0 FTE both must attend 50% of meetings
- If a participant works at more than 1 Trauma Center, they must attend 50% of meetings at each Trauma Center

Rotating from Another Hospital

- Exception: Credentialed but not included on the primary trauma call roster
 - These Trauma Surgeons are not expected to participate in meetings
 - If their status changes and they begin on the primary trauma call roster, they will be expected to attend meetings.
 - The Start Date is their 1st day on the trauma call roster
 - If their status changes temporarily (for example, due to vacancies) and they are on the primary trauma call roster for a period of time, they will be expected to attend meetings
 - The Start Date is their 1st day on the trauma call roster and the End Date is their last day on the trauma call roster

Committee Attendance Log Template

On the PTSF Website



On the PTSF Website

PTSF Trauma Accreditation Site Survey

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Preparing for Site Survey

- Read the [Site Survey Guidebook](#) to prepare for the accreditation site visits. Applicable for all trauma levels, accredited or pursuing accreditation
- Complete the [Application for Survey](#) (AFS). *PTSF recognizes that the pandemic resulted in temporary changes to standard processes and care. To assist hospitals in completing the AFS, PTSF created this guide: [AFS Responses in the Setting of COVID-19](#)*
 - [AFS User Manual](#) located under Support
 - [AFS Attachment and Report List](#)
 - [AFS Survey Eligibility Requirements](#) signed by hospital administration
 - [Multidisciplinary Peer Review PI Meeting Attendance Log Template](#), Required for AFS
 - Optional Trauma Program Manager Continuing Education Template and Trauma Program Medical Director Continuing Education Template are available in the [Support section](#) of the Central Site Portal
- Submit the Site Survey Information Form to PTSF 3-weeks prior to site survey ([Level I-III Form](#) or [Level IV Form](#))
- 3 weeks prior to survey, PTSF will communicate the Medical Records Selection
- Institutions with Alternate Pathway providers will submit the [Alternate Pathway Provider Medical Record Form](#) one week prior to survey

Trauma Centers elevating their level of trauma center accreditation should refer to PTSF Policy [AC-138](#)

Level IV Trauma Centers with a Mid-Cycle Panel Review will follow the process outlined in PTSF Policy [AC-139](#)

	A	B
1	<p>pennsylvania TRAUMA SYSTEMS foundation</p> <p>**This Template must be completed for the calendar year prior to survey, tab 2 must be saved as a PDF and uploaded to the Application for Survey**</p>	
2	INSTRUCTIONS:	
3	* Updated 1.1.2022 Compliance expectations referred to in this template is based on most recent Standards of Accreditation.	
4	* A Sample of a completed template is on tab 3. Click on the tab titled "Sample" to view.	
5	* Customize Role/Title, meeting frequency, etc. to your hospital.	
6	* Each Cell has it's own Instructions or notes - click on the cell to see the yellow instructions/notes as guidance for that specific cell.	
7	<p>* How To Delete A Row: If a Role/Title is not applicable, Delete <u>Entire</u> Row by highlighting the entire row, right click and choose "Delete" - This is important to retain the format, layout, and programming of the worksheet. Do not Delete only 1 cell and Do not shift cells - this would affect the format, layout and programming.</p>	
8	<p>* How To Add A Row: If another Role/Title is needed, Insert an <u>Entire</u> Row by highlighting the row below where you want the new row, right click and choose "Insert" - This is important to retain the format, layout and programming of the other rows. This new row typically will have the same format, layout and programming. Do not Insert only 1 cell and Do not shift cells - this would affect the format, layout and programming.</p>	
9	<p>* How to Delete A Column: If a meeting column is not needed, Delete Entire Column by highlighting the entire column, right click and choose "Delete" - This is important to retain the format, layout, and programming of the worksheet. Do not Delete only 1 cell and Do not shift cells - this would affect the format, layout and programming.</p>	
10	<p>* How To Add A Column: If another Meeting column is needed, Insert an <u>Entire</u> Column by highlighting the column to the right of where you want the new column, right click and choose "Insert" - This is important to retain the format, layout and programming of the other column. Do not Insert only 1 cell and Do not shift cells - this would affect the format, layout and programming.</p>	
11	<p>* EXCUSED ABSENCES: Absences from meetings can <u>only</u> be excused if the individual is on <u>medical leave</u>, <u>military deployment</u> or <u>missionary leave</u>.</p>	
12	<p>* NOT EXCUSED ABSENCES: -Vacations -Patient care -Sick days -Locums or Per Diem not working that month -Providers rotating from another Trauma Center not working that month</p>	
	<p>Instructions PI Meeting Attendance Template Sample</p>	

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
1	Hospital Name:			Title of Committee:										Year:			
2	Role/Title	Name <small>(start or end dates if applicable)</small>	Meeting Date											% of Attendance	Comments		
3																	
4	TPMD																
5	Assistant TPMD / PI																
6	Medical Director																
7	TPM																
8	TPIC #1																
9	TPIC #2																
10	TPIC #3																
11	Registrar #1																
12	Registrar #2																
13	Registrar #3																
14	Registrar #4																
15	Registrar #5																
16	Trauma Surgeon #1																
17	Trauma Surgeon #2																
18	Trauma Surgeon #3																
19	Trauma Surgeon #4																
20	Trauma Surgeon #5																
21	Trauma Surgeon #6																
22	Trauma Surgeon #7																
23	Trauma Surgeon #8																
24	Trauma Surgeon #9																
25	Trauma Surgeon #10																
26	Trauma AP #1																
27	Trauma AP #2																
28	Trauma AP #3																
29	Trauma AP #4																
30	Trauma AP #5																
31	Emergency Medicine Liaison	Primary															
32		Secondary															
33	Radiologist Liaison	Primary															
34		Secondary															
35	Orthopedic Liaison	Primary															
36		Secondary															
37	Neurosurgery Liaison	Primary															
38		Secondary															
39	Anesthesiology Liaison	Primary															
40		Secondary															
41	Critical Care Medicine / Admitting Service	Primary															
42		Secondary															
43		Primary															
44		Secondary															
45																	
46																	
47																	

Instructions

PI Meeting Attendance Template

Sample

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Hospital Name: Trauma Hospital		Title of Committee: Multidisciplinary Peer Review Committee										Year: 2022			
Role/Title	Name (start or end dates and excused absence indication if applicable)	Meeting Date												% of Attendance	Comments
		1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022		
TPMD	Dr. Doe	X	X	X		X	X	X		X	X	X	X	83%	
PI Medical Director	Dr. Doh (ended 7/29/22); Dr. Dough (started 9/5/22)	X	X	X	X	X	X				X	X	X	90%	
TPM	John Doe	X	X	X	X	X	X		X	X	X	X	X	100%	
TPIC #1	Jane Doe	X	X	X	X	X	X		X	X	X		X	75%	
TPIC #2	John Q. Public (end 6/5/22)	X	X	X	X	X								83%	
TPIC #3	John Roe (start 6/8/22)							X	X	X	X	X	X	100%	
Registrar #1	Richard Roe	X	X	X		X	X	X	X				X	67%	
Registrar #2	Jane Roe	X	X		X		X		X	X	X	X	X	67%	
Registrar #3	Baby Doe		X	X	X	X			X		X	X	X	58%	
Trauma Surgeon	Dr. Janie Doe	X	X	X		X	X	X		X	X	X		75%	
Trauma Surgeon	Dr. Johnny Doe	X	X	X	X		X			X	X	X		67%	
Trauma Surgeon #3	Dr. Johnny Does (military deployment 3/5/22-6/5/22)	X	X					X		X	X	X	X		
Trauma Surgeon	Dr. Richard Miles	X			X		X			X	X	X		50%	
Trauma Surgeon #5	Dr. Mary Major (medical leave 11/5/21-1/15/22)			X		X				X		X	X	45%	7/3/2022 TPMD reviewed PI Meeting attendance responsibilities. Attendance reviewed with Dr. Major following each meeting. Since counseling meeting attendance 3/5 (60%).
Trauma Surgeon	Dr. Judy Doe	X	X	X	X	X	X		X	X	X	X		83%	
Trauma Surgeon	Dr. Mary Moe (started 8/25/22)										X	X		50%	
Trauma AP #1	James Doe		X		X			X	X	X				42%	6/5/2019 TPMD reviewed PI Meeting attendance responsibilities. Attendance reviewed with Mr. Doe following each meeting. Since counseling meeting attendance 3/6 (50%).
Trauma AP #2	Jane Poe (ended 4/5/22)		X											25%	AP no longer employed.
Trauma AP #3	Cali Doe		X						X			X	X	58%	
Emergency Medicine Liaison	Primary: Dr. Princess Doe Secondary: Dr. Precious Doe	X						X	X		X			75%	
Radiologist Liaison	Primary: Dr. Mark Moe Secondary: Dr. Larry Loe	X							X	X			X	67%	
Orthopedic Liaison	Primary: Dr. Brett Boe Secondary: Dr. Carla Coe	X	X					X	X	X	X	X	X	100%	
Neurosurgery Liaison	Primary: Dr. Donna Doe Secondary: Dr. Frank Foe	X						X		X	X		X	75%	
Anesthesiology Liaison	Primary: Dr. Grace Goe Secondary: Dr. Paula Poe (ended 2/3/22) Dr. Sammy Soe (started 5/13/22)	X	X	X		X			X		X		X	75%	
Critical Care Medicine Liaison	Primary: Dr. Norma Noe Secondary: Dr. Marta Moe	X	X			X		X			X	X		58%	

HOW TO CALCULATE SUBSPECIALTIES WITH A PRIMARY AND SECONDARY LIAISON
Using the Critical Care Medicine Subspecialty as an example:

*Count total meeting dates for the year. In this example, there are 12.

*Count the number of meetings that 1 or both Liaisons attended. In this example, 5 meetings were attended by 1 Liaison and 2 meetings (circled in red) were attended by both. A total of 7 meetings.

HOW TO CALCULATE SUBSPECIALTIES WITH A PRIMARY AND SECONDARY LIAISON

Using the Critical Care Medicine Subspecialty as an example:

*Count total meeting dates for the year. In this example, there are 12.

*Count the number of meetings that 1 or both Liaisons attended. In this example, 5 meetings were attended by 1 Liaison and 2 meetings (circled in red) were attended by both. A total of 7 meetings.

Scroll down to see details of how this worksheet was completed

Enter if did or did not attend
Note that days off, vacations, sick days or patient care are NOT considered excused absences.
Excused Absence= Military deployment, medical leave and missionary work.

Calculating Attendance

Attendance Formula

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

Calculating Attendance

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Johnny Doe	X	X	X		X	X	X		X	X	X	X

$$\frac{10}{12} \times 100 = 83\% \text{ attendance}$$

Prorating Attendance

prorate /prō'rāt/ *verb* to divide, distribute, or assess proportionately



Prorating Attendance

- Change the denominator in the formula

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

- Only count those meetings the individual could attend:
 - After start date
 - Prior to end date
 - Before and after military deployment, medical leave or involved in missionary work

Prorating After Start Date

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings *AFTER THE START DATE*$$

Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
John Roe (start 6/8/22)							X	X	X	X	X	X

Start Date
= 6/8/22

Do not include the 6
meetings prior to 6/8/22 in
the denominator

Include the 6 meetings
after 6/8/22 in the
denominator

$$\frac{6}{6} \times 100 = 100\% \text{ attendance}$$

Prorating Before End Date

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings *BEFORE THE END DATE*$$

Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Jane Poe (ended 4/5/22)		X										

End Date
= 4/5/22

Include the 4 meetings
prior to 4/5/22 in the
denominator

Do not include the 8
meetings after 4/5/22 in
the denominator

$$\frac{1}{4} \times 100 = 25\% \text{ attendance}$$

**As a side note:
this individual is
NOT compliant**

Prorating Military Deployment, Medical Leave and Missionary Work

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings *BEFORE \& AFTER EXCUSED ABSENCE*$$

Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
John Doe (military deployment 3/5/22-6/5/22)	X	X		/	/	/	X		X	X	X	X

Military
Deployment =
3/5/22-6/5/22

Do not include the 3 meetings
between 3/5/22 and 6/5/22 in
the denominator

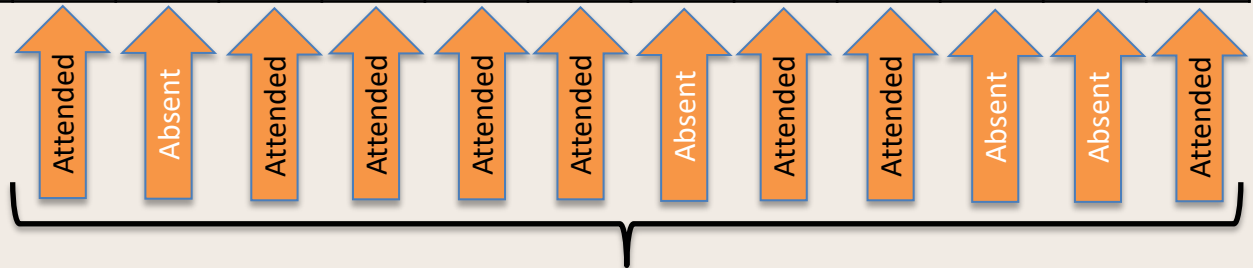
Include the 3 meetings prior to 3/5/22 and the 6 meetings after 6/5/22 in the denominator

$$\frac{7}{9} \times 100 = 78\% \text{ attendance}$$

Calculating Subspecialties

$$\frac{\text{\# of meetings } \textit{THE SUBSPECIALTY} \text{ attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

Role/Title	Name		Meeting Date											
			1/2/22	2/2/22	3/2/22	4/2/22	5/2/22	6/2/22	7/2/22	8/2/22	9/2/22	10/2/22	11/2/22	12/2/22
Radiologist Liaison	Primary	Dr. Mark Moe	X		X	X	X			X	X			
	Secondary	Dr. Larry Loe	X			X		X			X			X



Include all 12 meetings
in the denominator

$$\frac{8}{12} \times 100 = 67\% \text{ attendance}$$

Calculating Attendance for Unique Situations

Per Diem, Rotating from Another Hospital, & Locum Tenens

- Use the same formula

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

- Prorate for start and end date, military deployment, medical leave and missionary work only
- Attendees are not excused the months they do not work

Per Diem Example #1

- Scenario:

A Per Diem provider works when call coverage is needed, therefore some months they work multiple shifts and other months they do not work. They are employed at the hospital as Per Diem status the entire calendar year.

Per Diem Example #1

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Richard Roe				X		X	X	X			X	X

Include all 12 meetings
in the denominator

$$\frac{6}{12} \times 100 = 50\% \text{ attendance}$$

Per Diem Example #2

- Scenario:

A Per Diem provider works when call coverage is needed, therefore some months they work multiple shifts and other months they do not work. They started working at the hospital as Per Diem status on 7/20/22.

Per Diem Example #2

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings *AFTER THE START DATE*$$

Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Janie Doe (start 7/20/22)								X	X	X		

Start Date
= 7/20/22

Do not include the 7
meetings prior to 7/20/22 in
the denominator

Include the 5 meetings
after 7/20/22 in the
denominator

$$\frac{3}{5} \times 100 = 60\% \text{ attendance}$$

Locum Tenens Example #1

- Scenario:

A Locum Tenens is contracted to work January to June however they only work 1 of the months.

Locum Tenens Example #1

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings *BETWEEN THE START \& END DATE*$$

Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Mary Moe (contract start 1/1/22, contract end 6/30/22)		X	X									

Start Date = 1/1/22
 &
 End Date = 6/30/22

Include the 6 meetings prior
 to 6/30/22 in the
 denominator

Do not include the 6
 meetings after 6/30/22
 in the denominator

$$\frac{2}{6} \times 100 = 33\% \text{ attendance}$$

**As a side note:
 this individual is
 NOT compliant**

Locum Tenens Example #2

- Scenario:

A Locum Tenens is contracted to work January to June. The same Locum Tenens has a 2nd separate contract at the same facility November to December.

Locum Tenens Example #2

of meetings attended

of scheduled meetings *BETWEEN THE START & END DATE OF BOTH CONTRACTS* x 100 = % attendance

Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Mary Moe (1 st contract start 1/1/22, contract end 6/30/22; 2 nd contract start 11/1/22, contract end 12/31/22)		X	X		X	X						X

1st Contract Start
Date = 1/1/22 &
End Date = 6/30/22;
2nd contract Start
Date = 11/1/22 &
End Date = 12/31/22

Do not include the 4 meetings when
the Locum Tenens did not have a
contract in the denominator

Include the 6 meetings during the 1st contract (1/1/22-6/30/22) and the 2 meetings during the
2nd contract (11/1/22-12/31/22) in the denominator

$$\frac{5}{8} \times 100 = 63\% \text{ attendance}$$

Rotating from Another Hospital Example #1

- Scenario:

Trauma Surgeon from Trauma Center A works at Trauma Center B when call coverage is needed, therefore at Trauma Center B they work multiple shifts some months and other months they do not work. This staffing plan is in place the entire calendar year

Rotating from Another Hospital Example #1

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

TRAUMA CENTER A												
Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Randy Roe	X	X	X		X	X		X	X	X	X	X

$$\text{Trauma Center A } \frac{10}{12} \times 100 = 83\% \text{ attendance}$$

TRAUMA CENTER B												
Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/16/22	2/16/22	3/16/22	4/16/22	5/16/22	6/16/22	7/16/22	8/16/22	9/16/22	10/16/22	11/16/22	12/16/22
Randy Roe	X	X				X		X	X			X

$$\text{Trauma Center B } \frac{6}{12} \times 100 = 50\% \text{ attendance}$$

Rotating from Another Hospital Example #2

- Scenario:

Trauma Center A has Trauma Surgeons from Trauma Center B credentialed but not included on the primary call roster. Trauma Center A has a change to their staffing plan on May 1st that includes 1 Trauma Surgeon from Trauma Center B on the trauma call roster while also remaining on the trauma call roster for Trauma Center B

Rotating from Another Hospital Example #2

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

TRAUMA CENTER A												
Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Sam Smith (start date 5/1/22)					X	X		X	X	X	X	X

$$\text{Trauma Center A } \frac{7}{8} \times 100 = 88\% \text{ attendance}$$

TRAUMA CENTER B												
Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/16/22	2/16/22	3/16/22	4/16/22	5/16/22	6/16/22	7/16/22	8/16/22	9/16/22	10/16/22	11/16/22	12/16/22
Sam Smith	X	X			X	X		X	X			X

$$\text{Trauma Center B } \frac{7}{12} \times 100 = 67\% \text{ attendance}$$

Rotating from Another Hospital Example #3

- Scenario:

Trauma Center A has Trauma Surgeons from Trauma Center B credentialed but not included on the primary call roster. Trauma Center A has a Trauma Surgeon out on medical leave for 3 months, and during those 3 months a Trauma Surgeon from Trauma Center B will be included on the primary call roster

Rotating from Another Hospital Example #3

$$\frac{\text{\# of meetings attended}}{\text{\# of scheduled meetings}} \times 100 = \% \text{ attendance}$$

TRAUMA CENTER A												
Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/2/2022	2/2/2022	3/2/2022	4/2/2022	5/2/2022	6/2/2022	7/2/2022	8/2/2022	9/2/2022	10/2/2022	11/2/2022	12/2/2022
Penny Poe (start date 5/1/22; end date 7/31/22)					X	X						

$$\text{Trauma Center A } \frac{2}{3} \times 100 = 67\% \text{ attendance}$$

TRAUMA CENTER B												
Name (start or end dates and excused absence indication if applicable)	Meeting Date											
	1/16/22	2/16/22	3/16/22	4/16/22	5/16/22	6/16/22	7/16/22	8/16/22	9/16/22	10/16/22	11/16/22	12/16/22
Penny Poe		X	X			X	X	X				X

$$\text{Trauma Center B } \frac{6}{12} \times 100 = 50\% \text{ attendance}$$

Other Unique Situations or Questions?

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Excel Bonus Tip

- For the AFS must use the [PTSF Committee Attendance Log Template](#)
- Add Formulas to Calculate for you!

Available to attend all or has a start or end date	=COUNTA(range)/COLUMNS(range)
Has a mid-calendar excused absence	=COUNTA(range)/(SUM(COLUMNS(range),COLUMNS(range)))