

*Welcome to the December 2024 PTSF Board of Directors Update which highlights the latest PTSF Board of Directors approvals from the December Board Meeting and other news of interest!*

### A FAREWELL NOTE FROM JULIET ALTENBURG



Amy Kempinski (left) and Juliet Altenburg (right) posing with the ceremonial pen used to sign the EMS Act of 1985 into law which created the Pennsylvania Trauma Systems Foundation

This week marked my last trip to the PTSF office where I did all the obligatory end of employment rituals of returning keys, cards, and equipment. Since the Spring when I announced my retirement it has been an emotional journey. PTSF is only the second employer I've said goodbye to! These last 25 years of service as a PTSF board member followed by my Presidency have permeated every facet of my life. I leave knowing that a big segment of my life has been spent doing meaningful work with wonderful people. Chief among them is my staff who have been role models of grace and resilience during times of incredible challenge. Next are my board members who I have learned so much from over the years. These gifted volunteers have spent countless hours taking time out of their busy schedules to support our trauma system and its hospitals in being the best they can be for the benefit of the injured patients they care for. And then there are countless individuals from our hospitals and organizations with similar missions who have enriched my life through their talent and kindness. Although I've used the word "retirement" to categorize this next step, it really falls short in many ways. I see it more as a time of "renewal" vs. "retirement". I am excited by the prospect of continuing my contributions but in different ways both locally and internationally with kind and passionate people whose aim is to make life better for those most in need. I leave PTSF knowing our trauma system is in wonderful hands under the leadership of Amy Kempinski, the PTSF Team, Board of Directors, and our passionate trauma centers. Each of us has a purpose, and that purpose isn't associated with a title. My purpose is service which I look forward to at a more leisurely pace in the days ahead. Thank you all for making my work at PTSF so enjoyable and enriching. I wish you all the best in the new year and beyond! - Juliet

### CONGRATULATIONS TO THE NEW PRESIDENT



The Pennsylvania Trauma Systems Foundation (PTSF) Board of Directors is pleased to announce the appointment of Amy Kempinski, MSN, RN, CEN, TCRN, as its next President. She will assume this role on January 1, 2025, upon the retirement of current President, Juliet Altenburg.

“We are delighted to welcome Amy Kempinski as our new President,” said Dr. Henry Boateng, Chair of the PTSF Board of Directors. “After a rigorous nationwide search, including input from trauma care experts, organizational partners, and PTSF Board members, Amy’s comprehensive understanding of trauma systems and professional leadership made her the clear choice to lead

PTSF into the next chapter of innovative trauma system development.”

Kempinski, who previously served as the Foundation's Vice President, brings extensive experience in trauma systems and clinical expertise to this role. Her distinguished career spans the trauma spectrum, and her national influence is exemplified through her role as a member of the American College of Surgeons System Consultation Team, and her work as a consultant and site surveyor for trauma centers across the United States.

A Past President of the Society of Trauma Nurses (STN), Kempinski demonstrated her commitment to advancing trauma care through numerous leadership positions and educational initiatives. She is an active member in multiple professional organizations and has notable contributions to the field, including publications focused on trauma accreditation, performance improvement, crew resource management, leadership, and injury prevention.

In her new role, Kempinski will oversee PTSF's mission of improving outcomes for injured patients through accreditation, education, and research across Pennsylvania's trauma centers. She will lead strategic initiatives to enhance the state's trauma care system and strengthen collaboration among healthcare providers.

### PTSF BOARD NEWS

#### 2025 BOARD OFFICERS

*Congratulations to the following PTSF Board Officers:*



**Henry Boateng, MD**, will serve as our Board Chair for a second year. Dr. Boateng is the Assistant Professor of Orthopedics and Rehabilitation at the PennState Health Milton S. Hershey Medical Center and represents both the Pennsylvania Medical Society and Pennsylvania Orthopedic Society on the PTSF Board. Dr. Boateng has served on the board for eight years.



**Debbie Chappel, MSN, RN**, will serve as our Board Vice Chair for a second year. Debbie is the Trauma Program Manager at AHN Allegheny General Hospital and represents the Pennsylvania Trauma Nurse Advisory Council (PATNAC) on the Board. Ms. Chappel has served on the Board for six years.



**Erin Pica, MHA**, will serve as the Secretary/Treasurer on the PTSF Board. Erin is the Vice President, Service Line Operations/Surgery, with responsibility for Trauma at WellSpan Health. Erin will replace Doug Hock, Vice President, and System COO at Children’s Hospital of Philadelphia. Ms. Pica has served on the Board for four years.

### WELCOME NEW BOARD MEMBER DR. BLAKE BAILEY



**Blake Bailey, DO, MBA, FACEP, FAAEM**, is the Vice Chair, Department of Emergency Medicine at Reading Hospital, Tower Health. In his role as Vice Chair, Dr. Bailey oversees department operations, including the ED mental health unit, stroke care, sepsis care, and trauma operations. He received his medical education at Philadelphia College of Osteopathic Medicine and did his residency at Lehigh Valley Health Network. He will represent the Pennsylvania College of Emergency Physicians (PACEP) on the PTSF Board. He currently serves as Vice President of PACEP and will be President Elect in April 2025.

### CONGRATULATIONS TO PENN HIGHLAND DUBOIS!



On December 9, 2024, Penn Highlands DuBois received the Rural Health Program of the Year Award from the Pennsylvania Office of Rural Health for their outstanding work as a rural Level II trauma center. To read more about the distinction go to: <https://bit.ly/4gAvGqG>

*Shown displaying the Rural Health Program of the Year Award are (l. to r.)*

*Lisa Davis, MHA, Director, Pennsylvania Office of Rural Health and Outreach Associate Professor of Health Policy and Administration, Pennsylvania State University; Philip S. Vuocolo, MD, MHA, FACS, Trauma Program Medical Director for Penn Highlands DuBois; Holly Hertlein, BSN, RN, CEN, Trauma Program Manager, Penn Highlands DuBois; and Will Chinn, FACHE, President, Penn Highlands DuBois and Penn Highlands Clearfield.*

### PTSF FEES FOR 2026

To an effort to give trauma center administrators ample advanced notice, the PTSF Board of Directors approved fees for accredited trauma centers and hospitals pursuing accreditation for 2026. The rates reflect an additional 5 percent increase and will be reflected in invoices distributed to hospitals in the fall of 2025. The fees can be accessed [HERE](#).

### PTSF STAFF NEWS

#### TECHNOLOGY & TRAUMA REGISTRY UPDATES



[Lyndsey Diehl](#), RHIA, CHDA, CSTR, Director of Trauma Registry

#### Updated Trauma Registry Resources

The 2025 PTOS Manual and additional trauma registry resources have been posted to the TraumaHQ Library Resources. This includes an updated PTOS Change Document and updated PTSF Facility List.

#### TR-110 – Timeliness of Submission to the Central Site

While TR-110 – Timeliness of Submission to the Central Site has not been formally waived by the PTSF Board of Directors, please know that PTSF Staff and the PTSF Board of Directors remain sensitive to your concerns. We understand the challenges related to the intensity of the software transition and recognize that your ability to abstract trauma registry data timely and efficiently has been impacted. The PTSF Board of Directors encourage trauma program to try and maintain timeliness of submission to the central site for the trauma registry. The impact of the software transition and its many components on TR-110: Timeliness of Submission to the Central Site will be monitored by PTSF throughout the first half of 2025. Users can expect a Timeliness of Submission report within TraumaHQ within the next few months which will help in the evaluation of submission timeliness at your center and guide the PTSF Board of Directors in any future decision making related to TR-110. Until then, the PTSF Board of Directors will continue evaluating registry timeliness of submission on a case-by-case basis. Note, a precedent has been set that a significant issue related to TR-110 will not be issued if there is any evidence that software/technical issues prevented a trauma center from successfully meeting the requirements of TR-110. We know that everyone is extremely dedicated to submitting trauma registry data timely, and we appreciate your continued efforts to do so amid this unprecedented software transition. Thank you for your dedication and commitment to high quality, timely trauma registry data!

#### SOFTWARE TRANSITION UPDATE

[Rebecca Geyer](#), MSN, RN, TCRN, Director of Performance Improvement



#### TraumaHQ Update:

As has been the case over the past two to three years, a significant component of the December PTSF Board of Directors meeting was focused on the software transition. During the first four months of the software deployment, customer service and responsiveness by IQVIA has been timely and responsive, with many tickets resolved almost immediately or in a timely manner. PTSF has been greatly supported by the expertise of Heather Danley and Maggie Broadwell, as they've almost independently processed hundreds of support requests submitted since go-live. These two have worked tirelessly to field questions via email, phone, or teams online support and have greatly assisted supporting our trauma centers as we have transitioned. I am sure many of you have received their friendly and experienced support! Thank you, Maggie and Heather!

While the software build work continues, and we are all aware of the significant and impactful delays, the Board continues to appreciate all your feedback and patience as the work continues. The Board is working with PTSF, IQVIA, and additional key stakeholders to best solution out an increasingly complex build process. We anticipate a smoother process to communicate enhancements included in each release, more timely notification of those releases, and a decrease in unanticipated technical delays as we move into 2025!

### ACCREDITATION AND SURVEY UPDATE



[Darlene Gondell](#), MSN, RN, CCRN-K, CNRN, TCRN, Director of Accreditation

Thank you to everyone for your support and prompt responses during the rescheduling of our 2025 surveys. We have confirmed all the 2025 survey dates and are finalizing the 2026 schedule.

On November 5, 2024, the AFS Questions Handbook was uploaded to TraumaHQ's library. In early 2025, we will update this document to include report writing instructions. The Survey Guidebook will also be revised, and PTSF will conduct individual meetings with each center scheduled for a 2025 survey to discuss specific details. We look forward to an exciting survey year!

### COMMITTEE UPDATES

#### PIPS COMMITTEE

PIPS Chair and Vice-Chair: Kim Shoff, BSN, RN, CCRN and Leda Heidenreich, MSN, RN, CCRN

Board Committee Representative: Rebecca Wilde-Onia, MSN, RN, CCRN, TCRN

PTSF Staff Liaison: Rebecca Geyer, MSN, RN, TCRN, Director of Performance Improvement

The PIPS Committee met to review some additional PI OFI definitions included in the software rollout. Two OFI definitions that needed formal approval were the following:

- **Guideline Deviations (Events 9109-9168)**- any deviation to a CPG/PMG that has been defined at the facility level (*preconfigured on the guidelines tab*)
- **Deviation from guidelines/protocols (PMG/CPG) (9108)**- any deviation to a CPG/PMG that has not already been preconfigured.

There were also a few OFI definitions brought forward to the PIPS Committee for review for clarification, as these definitions have been a frequent area of confusion, concern, and questions. The PIPS Committee made the following revisions, with Board approval to the following definitions:

- **9077- Transfer Delay:** Opportunities in transfer timing (transfer in or out) that do not meet Audit Filter 11a or 11b. Examples are prolonged workup (delays in radiology/labs), delayed decision to transfer (provider delay), excessive workup/studies, or delay in transport team arrival after dispatch.
- **9086- Transfer to Higher Level of Care**-Unplanned and in-house patient transfers (observational status or med-surg now being upgraded to Step-down or ICU level of care).
- **9102- Airway Equipment Malfunction**- any intentional change of an endotracheal tube or ventilator due to ETT or ventilator malfunction/issue
- **9106-Nursing: Care Issue/Concern**- Nursing care provided that does not meet the standard of care expected or deviates from trauma admission orders for monitoring and care that does not fall within other OFIs.

And lastly, the Board, with PIPS Committee approval, made the **recommendation for "AM-PAC 6 clicks" as the recommended tool for Adult Trauma Centers to replace the FIMS scores.** AM-PAC 6 clicks has not been

validated in pediatric centers, although some centers are already using it, therefore the recommendation is limited to adult centers with more information to come. It is up to each center to determine policies around using this tool, and it is planned for incorporation into our software.

## STANDARDS COMMITTEE

Board Committee Chair: Patrick Kim, MD

Committee Vice Chair: Mike Taramelli, RN

PTSF Staff Liaison: [Darlene Gondell](#), MSN, RN, CCRN-K, CNRN, TCRN, Director of Accreditation

The Standards Committee and PTSF Board of Directors approved the following changes and clarifications to the Standards of Accreditation. The phrase “first responder” has been eliminated from the Standards, including the Glossary. This phrase has been replaced with appropriate clarifying language.

### Standard 1: Commitment

- Removed the phrase “first responder” and clarified the language for Level III highest level response time.
  - Effective immediately

### Standard 3: Trauma Program Medical Director

- Added the existing requirement from PTSF policies that new TPMDs must participate in the PTSF Site Survey / Accreditation Education within the year prior to their first survey (All Levels) and panel review (Level IV only).
  - Effective immediately

### Standard 4: Trauma Program Manager

- Added the existing requirement from PTSF policies that new TPMs must participate in the PTSF Site Survey / Accreditation Education within the year prior to their first survey (All Levels) and panel review (Level IV only).
  - Effective immediately

### Standard 6: PIPS

- Added the recommendation for new trauma PI Coordinators to participate in the PTSF Site Survey / Accreditation Education within the year prior to their first survey (All Levels) and panel review (Level IV only).
  - Since this is a recommendation, effective immediately
- Clarified the language related to timeliness of response in the ICU to track: timeliness of response to emergency/unplanned situations in the ICU.
  - Effective immediately

### Standard 8: Injury Prevention, Public Education & Outreach

- Level I-III: Clarified that the acceptable mental health screenings focus on identifying patients at high risk of post-traumatic stress disorder and/or depression.
  - Changed expected compliance date to 1.1.26
- Level I-III: Changed the expected compliance date for the new substance abuse screening, brief intervention, and referral to treatment standard to 1.1.26.

### Standard 10: Physicians

- Level IV: Revised the Orthopedic Surgery Standards. The hospital must choose one of the following three options:

- Orthopedic surgery will not participate in the care of the injured patient.
- Orthopedic surgery as an operative service. Must meet all the following requirements:
  - Published on-call schedules must be maintained with 24/7/265 coverage with physicians.
  - Orthopedic surgeons must maintain applicable specialty board certification/eligibility OR maintain 8 hours of trauma-related CME annually (completion of an internal educational program is acceptable).
  - An identified orthopedic surgeon Liaison must be identified and attend a minimum of 50% of the multidisciplinary trauma peer review meetings. The attendance benchmark may be shared with a second identified orthopedic surgeon.
  - Must have a minimum of one intra-compartmental pressure monitoring device within the hospital.
- Orthopedic surgery as a non-operative service. Must meet all the following requirements:
  - Orthopedic surgeons must maintain applicable specialty board certification/eligibility OR maintain 8 hours of trauma-related CME annually (completion of an internal educational program is acceptable).
  - Recommend identifying an orthopedic surgeon Liaison who can attend the multidisciplinary trauma peer review meetings on an as needed basis when orthopedic cases are discussed.
- Effective immediately

### Standard 11: Advanced Practitioners

- Level I-III: Clarified that APs functioning as a member of the trauma service caring for trauma patients in the ICU must maintain ATLS.
  - Effective immediately

### Standard 19: Intensive Care Unit

- Level I-II: Revised the ICU coverage for emergency/unplanned situations must be a physician.
  - A physician must be available within 15 minutes of request for emergency/unplanned situations. This coverage for emergencies is not intended to replace the primary admitting trauma surgeon in caring for the patient in the ICU. It is to ensure that the patient's immediate needs will be met while the primary surgeon is being contacted.
  - If the trauma attending is providing ICU coverage, a back-up ICU attending must be identified and available.
  - A resident can be used to meet this standard.
    - If a PGY-1, they must be in the second half of the first year within the institution.
    - Must maintain ATLS.
    - If a PGY-1-3, they must be supervised by a general trauma surgeon or a senior resident in general surgery (PGY-4 or above). The PGY-4 or above cannot be considered a replacement for the attending surgeon.
- Expected immediately
- Level III: Included the ICU coverage that is currently expected in the Physician Standard.
  - 24-hour coverage of all trauma patients and available within 15 minutes of request for emergency/unplanned situations.

- Coverage may include a surgeon, intensivist, hospitalist, or advanced practitioner.
- Expected immediately

### Standard 23: Radiology

- Level I-II: Clarified the expectation for Intervention Radiology (IR).
  - IR must be available 24-hours a day.
  - IR procedure for hemorrhage control that requires rapid intervention must begin within 60 minutes. Non-urgent IR procedures are not required to be completed within 60 minutes.
  - The trauma program must define hemorrhage control in addition to the parameters of an emergent IR procedure.
- The is a clarification, effective immediately

### Appendix D: Guideline and Policy Reference Tool

- Removed the policy for first responders.
- Revised the policy expectation for timeliness of response to emergent consults or emergency/unplanned situations, and patient criteria for: Physicians to the ICU, anesthesia (outside of the trauma resuscitation area), radiology (interventional), orthopedics and neurosurgery as applicable.
  - Effective immediately

The above revisions include the last of the ACS gap analysis. All the ACS 2022 Standards have been incorporated into the PTSF Standards. Thank you to the members of the Standards Committee for their dedication to updating the PTSF Standards based on the ACS 2022 Standards gap analysis.

The revised Standards of Accreditation are posted on the PTSF web site and dated 1.1.2025. Please contact Darlene Gondell at [dgondell@ptsf.org](mailto:dgondell@ptsf.org) with any questions or comments. Requests for Standards Committee topic discussion (for example, suggested new standard or clarification of current standard) should be submitted via this [form](#).

## POLICY AND PROCEDURE COMMITTEE



Board Committee Chair: Jo Ann Miller, MSN, FNP-C, CCRN, TCRN  
 PTSF Staff Liaison: [Courtney Moraites](#), MPA

The Policy and Procedure Committee and the PTSF Board of Directors voted to modify the following policies:

### [Accreditation Policy AC-119 Surveyor Selection Criteria](#)

- The policy now requires that in-state surveyors must have previously participated in at least one PTSF survey to establish eligibility to serve as a surveyor.

### [Accreditation Policy AC-137 Accreditation Guidelines for Board Members](#)

- Significant issues can be assigned as a component of deliberations or at any time during a survey cycle.

### [Accreditation Policy AC- 136 Request for Reconsideration of Accreditation Deliberation Decision](#)

- The policy name changed to Policy [AC-136 Request for Reconsideration of Board of Directors Decision](#).
- The policy now addresses decisions regarding the duration of accreditation, significant issue(s) cited, or determination of de-accreditation listed in the accreditation report or significant issue notification.
- The procedures for the PTSF Board Panel Meeting and the full Board's final determination are clarified.



## 2025 PTSF NON-BOARD COMMITTEE MEMBERSHIPS

The PTSF Staff and Board of Directors would like to extend gratitude to all trauma centers for the submission of staff nominations for the 2025 PTSF Non-Board Committees. The 2025 Non-Board Committees include: Diversity, Equity, and Inclusion Committee, Outcomes Committee, PIPS Committee, Standards Committee, Trauma Injury Prevention Committee, Trauma Registry Committee, and Trauma Research Committee. Support from committee volunteers enables PTSF to advance its Mission: Optimal outcomes for every injured patient. Please visit the [PTSF Website for the 2025 Committee Rosters and Committee Descriptions](#).

## COMMUNICATIONS

### NEW TRAUMA PROGRAM NURSE LEADER ORIENTATION

Registration is open for the next New Trauma Program Nurse Leader Orientation on Tuesday, March 25, 2025, from 10:00 a.m. to 3:00 p.m. (virtual) New nurse leaders are invited to join PTSF staff for the orientation, which is facilitated by a variety of PTSF staff members. Topics include Understanding the PTSF, Trauma Organizations & Resources, Trauma Registry, Trauma Performance Improvement, Accreditation and Survey Overview, Trauma Program Resources, and “Hot Topics in Trauma.” The primary audience includes new Trauma Program Coordinators/Managers, Trauma Program Directors, Performance Improvement Coordinators, Nurse Registrars, Educators, and other trauma program nurse leaders from both pursuing and accredited centers. — [REGISTER HERE](#) —

### PTSF DIRECTORY AND EMAIL DISTRIBUTION

PTSF maintains a directory and various email groups for accredited trauma centers and hospitals pursuing accreditation. Please submit any changes to your directory page or changes that affect PTSF’s email groups as soon as they occur via the following Microsoft Form: [Accredited and Pursuing Trauma Center Staff Change Notification Form](#) also available via [the PTSF Website](#). Please consult [Accreditation Policy AC-128 Notification Regarding Changes in Trauma Center Operations](#) for guidance on changes in trauma program leadership/staff. The directory/email groups are updated continuously. The directory is distributed twice each year to all trauma program managers, typically in January and July, or upon request. Please contact [Courtney Moraites](#), PTSF Accreditation Coordinator, for assistance.

### COMMUNICATIONS TO PTSF

In lieu of paper mail, we encourage emailing all communications to the appropriate PTSF staff. Exceptions include payments which should be mailed to: **Pennsylvania Trauma Systems Foundation, 275 Cumberland Parkway, 234, Mechanicsburg, PA 17055.**

### Happy Holidays from the 2024 PTSF Board of Directors and Staff!



Back Row L-R: Jeffrey Kuklinski, Patrick Kim, Dave Loder, Dan Bledsoe, Jo Ann Miller, Raquel Forsythe  
 Front Row L-R: Rebecca Wilde-Onia, Philip Villanueva, Charles Barbera, Debbie Chappel (Vice Chair), Henry Boateng (Chair), Doug Hock (Treasurer), Richard Neff  
 Not Pictured: Elizabeth Dunmore, Joe Sawyer, Denise Torres, Senator Michele Brooks, Rep. Bryan Cutler, Rep. Dan Frankel, Senator Art Haywood



Back Row L-R: Dor Adams, Stephanie Radzevick, Matt Mowry, Grant Dittmer, Heather Danley, Maggie Broadwell, Gaby Wenger, Courtney Moraites  
 Front Row Left to Right: Rebecca Geyer, Amy Kempinski, Juliet Altenburg, Lyndsey Diehl, Darlene Gondell