



2026-2028 Strategic Plan

MISSION

Optimal outcomes for every injured patient in Pennsylvania.

VISION

We are committed to Zero Preventable Deaths from injury.

VALUES

Excellence, Innovation, Integrity, Collaboration and Stewardship

Excellence - We promote and support the highest standards of trauma care across the continuum—from injury prevention to acute care to rehabilitation—through rigorous accreditation, continuous performance improvement, education, and collaboration.

Innovation - We seek and support research, emerging technologies, and evidence-based best practices that standardize care and shape the future of trauma systems in Pennsylvania and beyond.

Integrity - We are committed to honesty, fairness, and accountability in all aspects of our accreditation processes and organizational operations.

Collaboration - We advance trauma care through respectful teamwork and multidisciplinary partnerships among trauma centers, healthcare professionals, and community stakeholders—developing uniform standards, mentoring emerging professionals, and achieving optimal patient outcomes together.

Stewardship - We are dedicated to the responsible oversight of Pennsylvania's trauma system through strategic operations, effective resource allocation, professional development, and clear communication that advances our mission and serves our trauma center partners.

Value Proposition

Through our unique

- Board of Directors comprised of administrators, legislators, nurses, and physicians who are leaders and advocates for trauma system excellence;
- Expert team of accreditation, performance improvement, trauma registry, and administrative professionals committed to excellence and innovation;
- Commitment to the full continuum of care—from injury prevention through rehabilitation—ensuring comprehensive system accountability;
- Advanced technology platforms for trauma center registry data acquisition, performance improvement analytics, and comprehensive system monitoring;
- Streamlined, rigorous, and accountable trauma center accreditation process grounded in integrity and uniform standards;
- Statewide multidisciplinary committees focusing on optimal outcomes, including Trauma Registry, Performance Improvement & Patient Safety, Outcomes, Diversity Equity & Inclusion, Standards of Accreditation, Injury Prevention, and Research; and
- Strategic partnerships with state, regional, and national trauma organizations that advance Pennsylvania's position as a leader in trauma care.

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

- Providing high-quality, evidence-based education and mentorship to trauma professionals at all career stages and across all levels of trauma centers;
- Advocating with legislators, policymakers, and the public on the critical value of comprehensive trauma centers and an integrated trauma system;
- Stewarding trauma data to support meaningful research, performance improvement, and system-wide quality enhancement;
- Facilitating multidisciplinary collaboration and knowledge sharing through committees, forums, and peer learning opportunities;
- Supporting the complete continuum of trauma care—from prevention through rehabilitation—to reduce preventable deaths and improve outcomes for all Pennsylvania communities and residents;
- Supporting trauma center performance improvement through expert consultation, standardized metrics and benchmarking, data-driven insights, and collaborative quality initiatives that drive measurable improvements in patient outcomes;
- Maintaining rigorous accreditation standards that ensure uniformity, accountability, and optimal patient outcomes statewide;
- Leading strategic initiatives and fostering innovation that position Pennsylvania's trauma system among the highest caliber in the nation.

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 PTSF as the accrediting body for trauma centers in Pennsylvania. In the four decades since its founding, PTSF has transformed from an accrediting organization into a comprehensive trauma system resource supporting trauma centers statewide. Today, PTSF provides critical infrastructure for data management, performance improvement, research, and education that positions Pennsylvania as a national leader in trauma care.

The previous strategic plan provided important directions for PTSF's work. During that period, the organization undertook a major software transition to TraumaHQ—a complex, multi-year initiative that required significant organizational focus and resources. While this transition necessitated adjustments to strategic timelines, PTSF maintained its core mission of trauma system excellence and continued to support Pennsylvania's trauma centers throughout the implementation process. The complexity and duration of this implementation exceeded expectations, requiring sustained organizational resources. Completing this transition remains the foundation upon which other strategic initiatives depend, and PTSF is committed to achieving platform stability that will enable the organization and trauma centers to realize the full benefits of this investment.

Recognizing the need to balance ongoing implementation demands with strategic advancement, the strategic planning process was designed to be comprehensive and inclusive, engaging stakeholders across Pennsylvania's trauma system. PTSF engaged Patrick Ball of CBY Professional Services to facilitate the planning effort. The process began with identifying partnering organizations, committees, and trauma leaders whose input would be critical to developing a meaningful and actionable plan. Questions and discussion framework were developed, and board and staff liaisons were identified to coordinate engagement activities.

Over the course of the planning period, twenty meetings were conducted—engaging over one hundred participants from across the trauma care continuum. This robust engagement ensured diverse perspectives were incorporated into the strategic direction. In addition to stakeholder input, the planning team reviewed key supporting resources which provided critical context regarding legislative changes, financial pressures, rural health challenges, and system-level trends affecting Pennsylvania's trauma system.

Several critical priorities carry forward from the previous strategic plan and continue to shape PTSF's work:

- **TraumaHQ Implementation:** The transition to TraumaHQ trauma software remains PTSF's highest operational priority, requiring significant resources from both trauma centers and PTSF staff.
- **Data Quality and Utilization:** While Pennsylvania's trauma registry contains rich data for research and performance improvement, full utilization remains constrained by platform limitations. TraumaHQ completion will unlock enhanced analytical capabilities.

- Access to Trauma Care: Geographic gaps in trauma care access persist, particularly affecting underserved and rural populations. Workforce shortages and funding challenges continue to impact system capacity.

A Board of Directors strategic planning retreat served as a pivotal component of the planning process. During the retreat, participants reviewed and affirmed the organization's Mission, Vision, Values, and Value Proposition, ensuring alignment with current priorities and future direction. The Board examined a summary of stakeholder interviews, conducting a thorough analysis of organizational strengths, weaknesses, opportunities, and threats (SWOT). Through facilitated brainstorming sessions, the Board explored strategic solutions in key areas including options to expand trauma services throughout Pennsylvania, research potential and capacity, and approaches to improving the collection, reporting, and analysis of trauma outcomes data. The insights and priorities identified during this retreat informed the development of the strategic imperatives, goals, and objectives outlined in this plan.

This strategic plan acknowledges that completing TraumaHQ implementation will require sustained focus. Most new strategic initiatives are therefore sequenced to begin after platform stability is achieved. The plan addresses three core imperatives: completing critical data infrastructure, ensuring comprehensive and equitable trauma care across the continuum, and strengthening PTSF's operational capacity.

Strategic Framework Overview

This strategic plan is organized around three core imperatives and eight supporting goals:

STRATEGIC IMPERATIVE 1: DATA INFRASTRUCTURE COMPLETION & EXCELLENCE

- Goal 1.1: Complete TraumaHQ platform implementation
- Goal 1.2: Enhance data quality and utilization capabilities
- Goal 1.3: Disseminate Knowledge and Best Practices

STRATEGIC IMPERATIVE 2: COMPREHENSIVE TRAUMA SYSTEM OPTIMIZATION

- Goal 2.1: Expand Trauma System Coverage
- Goal 2.2: Strengthen Level III/IV Centers and System Integration
- Goal 2.3: Support Development of Mass Casualty and Disaster Readiness Framework

STRATEGIC IMPERATIVE 3: OPERATIONAL EXCELLENCE

- Goal 3.1: Enhance Stakeholder Engagement
- Goal 3.2: Optimize Staffing and Organizational Capacity

Strategic Plan Details

STRATEGIC IMPERATIVE 1: DATA INFRASTRUCTURE COMPLETION & EXCELLENCE

Complete TraumaHQ implementation and establish a functional, reliable data infrastructure that reduces administrative burden while enabling the advanced analytics necessary to drive improved outcomes across Pennsylvania's trauma system.

Goal 1.1: Complete TraumaHQ platform implementation

Objective 1.1.1: Achieve full platform functionality and stability

Tasks:

- Complete data migration and validation for all historical data
- Resolve all critical and high-priority platform functionality preventing normal trauma center operations (Registry and PIPS)
- Deploy Application for Survey (AFS) module
- Deploy Survey Sync module
 - Optimize deliberation packet content and format within TraumaHQ to provide clear, actionable information
 - Achieve 75% or higher board member satisfaction with accreditation deliberations
- Establish IQVIA accountability mechanisms including regular performance reviews and service level agreements
- Deploy Inter Rater Reliability Module
- Begin user satisfaction rating on TraumaHQ platform functionality by module
 - Achieve 75% in 2027
 - Achieve 85% in 2028

Goal 1.2: Enhance data quality and utilization capabilities

Objective 1.2.1: Develop and deploy advanced analytics and reporting tools

Tasks:

- Complete TraumaHQ contractual reports
- Deploy reporting templates accessible to all TraumaHQ users
- Support trauma center research initiatives with enhanced data access capabilities
- Deploy custom reporting solutions providing TraumaHQ users with ability to generate tailored reports
- Develop and publish comprehensive TraumaHQ training library including reporting video tutorials, live demonstrations, and quick reference guides

Objective 1.2.2: Establish and publish annual system-level performance reports

Tasks:

- Create public-facing dashboards for PTSF website including but not limited to PTOS:
 - Demographic Data
 - Health Disparities (geography, race, ethnicity, and social determinants)
 - Injury Prevention Initiatives
- Publish revamped PTSF Annual Report
- Develop Pennsylvania Performance Improvement and Patient Safety Plan (PA PIPS)

- Explore linkage of PTOS data with external sources (PHC4, EMS, social determinants) for comprehensive population health analysis

Goal 1.3: Disseminate Knowledge and Best Practices

Objective 1.3.1: Position Pennsylvania as a national leader in trauma system data excellence

Tasks:

- Formalize Research Development Fund Management Policy to address finance principles, fund request process, and planned disbursements
- Enhance current research data access protocols, data use agreements, and compliance tracking capabilities to facilitate trauma center and academic research
- Conduct needs assessment to identify research priorities across the trauma care continuum
 - Develop a statewide trauma research agenda identifying priority research questions and collaboration opportunities
- Identify and pursue funding opportunities for trauma research including federal grants (NIH, CDC, HRSA), foundation funding, and collaborative industry partnerships by ongoing
- Disseminate lessons learned from TraumaHQ implementation through presentations and publications
 - Establish Pennsylvania as a resource for other states by implementing new trauma registry software
- Publish at least one peer-reviewed article on clinical best practices derived from PTOS data analysis

STRATEGIC IMPERATIVE 2: COMPREHENSIVE TRAUMA SYSTEM OPTIMIZATION

Build and sustain a comprehensive trauma system that spans the full continuum of care—from injury prevention through rehabilitation—ensuring equitable access, optimal outcomes, and system readiness and resilience despite external pressures.

Goal 2.1: Expand Trauma System Coverage

Objective 2.1.1 Identify and prioritize geographic gaps in trauma care access

Tasks

- Leverage TQIP Collaborative to support statewide pediatric readiness efforts
 - Publish process and findings
- Build on Horst landmark publication to identify optimal trauma center placement opportunities in underserved regions
- Develop advocacy materials demonstrating need for trauma care expansion in underserved areas
- Collaborate with newly accredited trauma centers to publish lessons learned and benefits of accreditation

Goal 2.2: Strengthen Level III/IV Trauma Centers and System Integration

Objective 2.2.1: Enhance Standards and Support for Level III/IV trauma centers

Tasks:

- Conduct gap analysis of current Level III/IV centers' Standards of Accreditation against American College of Surgeons (ACS) updated standards
 - Evaluate, align, and update PTSF standards based on gap analysis
- Collaborate with industry partners for Pennsylvania Rural Health Transformation Program funding to support Level III/IV workforce development and telemedicine capabilities
- Develop business case and advocacy materials demonstrating value of Level III/IV centers to policymakers
- Develop and deliver targeted education programming addressing Level III/IV operational challenges
- Establish standardized expectations and framework for mentor facility relationships with Level III/IV centers

Objective 2.2.2 Optimize Transfer Processes

Tasks:

- Document baseline transfer times and identify facilities with greater than three-hour delays
- Establish quality metrics for inter-facility transfers including appropriateness, timeliness, and patient outcomes
- Develop educational materials for referring hospitals on trauma center capabilities and transfer criteria
 - Facilitate baseline trauma knowledge in all Emergency Departments

Goal 2.3: Support Development of Mass Casualty and Disaster Readiness Framework

Objective 2.3.1: Facilitate Stakeholder Collaboration on Disaster Preparedness

Tasks:

- Meet with trauma leaders to define scope, stakeholders, and PTSF's facilitative role in disaster readiness planning
- Identify key partnering organizations and stakeholders (Department of Health Bureau of EMS, PA Emergency Health Services Council, PaCOT, military representatives, trauma center leadership)
- Initiate preliminary discussions with partnering organizations regarding disaster preparedness gaps and collaborative opportunities
- Convene stakeholder planning meetings to assess interest, define roles, and determine governance structure for collaborative disaster readiness initiative
- Support establishment of multi-stakeholder Disaster Preparedness Workgroup with representation from trauma centers, EMS, public health, military, and other key partners
- Support development of PTSF disaster preparedness framework aligned with partnering organization capabilities and priorities

STRATEGIC IMPERATIVE 3: OPERATIONAL EXCELLENCE

Optimize PTSF operations to deliver exceptional value through streamlined processes, effective communication, financial accountability, and continuous improvement in accreditation, education, and support services.

Goal 3.1: Enhance Stakeholder Engagement

Objective 3.1.1: Establish robust bidirectional communication channels with trauma centers

Tasks:

- Establish regular communication cadence and methods with trauma programs
- Conduct annual trauma center satisfaction survey to assess PTSF performance and identify improvement opportunities
 - Develop action plan to address opportunities for improvement identified
 - Achieve 75% or higher trauma center satisfaction with PTSF communication and responsiveness

Objective 3.1.2: Strengthen collaborative partnerships with key stakeholders

Tasks:

- Establish formal stakeholder leadership meeting with partnering organizational management leaders (Presidents/Executive Directors) including but not limited to: American Trauma Society PA Division, PA State Nurses Association, PA Emergency Health Services Council, PA Medical Society, and PATNAC
- Develop, trademark, and disseminate PTSF Badge Recognition Program, recognizing trauma center accreditation
- Formalize TQIP Collaborative policy to include governance and membership guidelines
- Establish the PTSF Clinical Excellence Award to recognize outstanding clinical practice in trauma care, including award criteria, selection process, and annual presentation at the Pennsylvania Trauma Symposium
- Strengthen collaborative relationship between PTSF and Pennsylvania Committee on Trauma (PaCOT) through regular liaison meetings and joint initiatives

Objective 3.1.3: Improve understanding and advocacy for Pennsylvania's trauma system

Tasks:

- Collaborate with Pennsylvania Emergency Health Services Council to deliver education for EMS providers clarifying capabilities and resources of trauma centers by level
- Create public-facing trauma center data resource accessible via PTSF website
- Engage patient advocates and trauma survivors in PTSF initiatives, education efforts, and public awareness activities
- Develop advocacy toolkit and talking points for trauma centers to use with legislators and community leaders
- Launch public awareness campaign highlighting trauma center value, benefits of trauma systems, and PTSF impact using newsletters, webinars, social media, and PTSF website

Goal 3.2: Optimize Staffing and Organizational Capacity

Objective 3.2.1: Cultivate culture of excellence and continuous improvement

Tasks:

- Implement annual 360-degree feedback process for leadership
- Develop and implement performance metrics aligned with strategic objectives for all staff roles
- Foster culture of innovation through quarterly staff brainstorming sessions and process improvement initiatives
- Conduct comprehensive staffing analysis based on current and projected workload including trauma center growth and TraumaHQ support demand
- Conduct annual staff satisfaction survey and achieve 75% or higher satisfaction with organizational culture and leadership

Objective 3.2.2: Optimize operational efficiency and processes

Tasks:

- Develop an Artificial Intelligence (AI) Philosophy Statement and Policy
- Enhance financial reporting to Board, including revenue, expenses, and budget variance analysis for monthly and year-end budgeted projections
- Review accreditation fee structure to ensure it reflects a balanced and sustainable revenue/expense ratio
- Evaluate fiscal impact and implementation requirements of TraumaHQ Product Offering Addendum including potential revenue projections and resource implications

IMPLEMENTATION PRIORITIES

This strategic plan follows a deliberate progression from infrastructure completion through system assessment and optimization to strategic growth and national leadership. The phasing acknowledges that completing TraumaHQ implementation is the highest organizational priority and prerequisite for many subsequent initiatives.

Priority: Complete TraumaHQ Foundation

The first phase focuses organizational resources on achieving TraumaHQ platform functionality and establishing supporting infrastructure. Critical milestones include data migration completion, deployment of essential modules, and resolution of critical platform defects. PTSF deploys standardized reporting templates and enhances data access capabilities to support trauma center research. Research infrastructure strengthens through formalization of the Research Development Fund policy and enhanced data access protocols. Disaster preparedness groundwork begins with initial stakeholder identification, alongside the Level III/IV standards gap analysis against updated ACS requirements. The organization strengthens stakeholder partnerships, establishes regular communication with trauma programs, and implements foundational operational improvements including AI policy development, enhanced financial reporting, 360-degree feedback processes, and performance metrics aligned with strategic objectives.

Priority: Assess and Optimize the System

With platform stability achieved, organizational focus shifts to comprehensive system assessment and establishing baseline performance metrics. Vendor accountability mechanisms formalize through regular review and service level agreements to ensure sustained platform reliability. PTSF deploys remaining TraumaHQ modules (Survey Sync, Inter Rater Reliability), launches public-facing dashboards, develops custom reporting solutions, and creates comprehensive training resources. User satisfaction targets are established and measured to ensure platform effectiveness. System assessment intensifies with geographic access gap identification building on landmark research, baseline transfer time documentation, and research needs assessment across the trauma care continuum. Disaster preparedness advances through stakeholder planning meetings and workgroup establishment. Accreditation fee structure undergoes comprehensive review. These assessments inform targeted improvements in the following year.

Priority: Drive Impact and Growth

The final phase concentrates on leveraging platform capabilities and prior assessments to drive measurable system improvements. PTSF publishes the Pennsylvania Performance Improvement and Patient Safety Plan and statewide trauma research agenda, completes Level III/IV education programming and mentor facility frameworks. The organization positions Pennsylvania as a national leader through TraumaHQ lessons learned dissemination, peer-reviewed research publication, and active pursuit of collaborative research funding opportunities. Public awareness campaigns launch, advocacy toolkits and materials deploy for underserved areas, and comprehensive staffing analysis informs future sustainability alongside evaluation of the TraumaHQ Product Offering Addendum. Patient advocates and trauma survivors engage meaningfully in PTSF initiatives. Ultimately, PTSF achieves satisfaction targets across trauma centers, board members and staff while establishing Pennsylvania as a model for trauma systems nationwide.