

Our first meeting was brief and more informational in nature. We will begin actual case review with our next meeting. Here is what the process will look like...

1. 1 month before the meeting elicit cases from the facilities that meet our criteria.
2. 2 weeks before the meeting send a list of the cases to be discussed to the subcommittee for review. This will include a run # for EMS review and the first and last initial and date of service for facilities.
3. The night of the meeting we will have an overview of the case and what criteria fell out. We will discuss the case and make further recommendations.

The criteria we will be monitoring will include;

1. GCS < 8 without intubation.
2. Lack of C-spine immobilization.
3. Transfers to other levels of care > 3 hours after patient arrival.
4. Trauma mortalities.

Enclosures;

1. I have enclosed a blank copy of the report we will be sending to the State Trauma Coordinator Quarterly. This was adopted by the SERTAC and looks like a good way to present the data. We will reengineer it to fit our data sets.
2. Trauma PI power point gives a brief over view of PI.
3. Confidentiality agreement – I will need a signed copy of this at the next meeting for all participants on the committee. The form refers to state language. I have provided a link with the resources the state has on confidentiality for your review.
http://www.dhs.wisconsin.gov/mh_bcmh/docs/ccs/040510handout.pdf



Confidentiality Agreement – NEW RTAC

As a member of the NEW RTAC PI Committee, you are required to conduct yourself in strict conformance to applicable laws and state policies governing confidential information. You are obligated to protect the confidentiality of both patient and organizational information. The violation of confidentiality laws and policies of the NEW RTAC may subject you to termination from the PI Committee as well as civil or criminal penalties under law.

As a condition of and in consideration of my access to confidential information, I acknowledge the following:

1. I will use confidential information only as needed to perform my legitimate duties as a member of the NEW RTAC PI Committee. This means that, among other things, that:
 - a. I will only access confidential information for which I have a need to know; and
 - b. I will not in any way repeat, copy, release, sell, loan, review, alter or destroy any confidential information except as properly authorized within the scope of my professional activities affiliated with the NEW RTAC and
 - c. I will not misuse or carelessly handle confidential information.
2. I have read and agree to comply with the state language on confidentiality.
3. I know that I must report actual or suspected confidentiality breaches or problems to the NEW RTAC Coordinator.
4. I understand that my obligations to protect the confidentiality of both patient and organizational information will continue after completion of my participation on the NEW RTAC PI Committee.

NEW RTAC PI Committee Member Name (print)

NEW RTAC PI Committee Member Name (signature)

Date