



**RCSI**

Leading the world  
to better health

Targeted Review and  
Amalgamation of  
Unmapped Major trauma  
and  
Ambulance data in Ireland:  
**TRAUMA**

Prof. Frank Doyle



# Team

## Investigators

- Prof Frank Doyle, RCSI
- Prof Conor Deasy, CUH, NOCA
- Ms Louise Brent, NOCA
- Ms Brid Moran, NOCA
- Dr Siobhan Masterson, NAS
- Mr David Willis, NAS
- Dr Fiona Boland, RCSI
- Mr David Hennelly, NAS
- Professor Anne Hickey, RCSI
- Professor Jan Sorensen, RCSI
- Ms Naomi Fitzgibbon, SII

## Collaborators

- Mr Keith Synnott, MMUH, HSE
- Ms Collette Tully, NOCA
- Prof Cathal O'Donnell, NAS
- Mr Martin Dunne, NAS
- Ms Donna Price, IRVA
- Prof Mary Clarke, RCSI
- Prof Fiona Lecky, TARN
- Prof Peter Cameron, Monash University
- Dr Michael Hogan, NUIG

## Postdoctoral Researcher

- Dr Nora Ann Donnelly

# Background & Aim

- No single database for patient journey
  - National Ambulance Service (NAS) captures data prior to hospitalisation on an electronic Patient Care Record (**ePCR**)
  - Major Trauma Audit (**MTA**) captures in-hospital care
- Inform decision making to ensure patients are getting the right care, at the right time, by the right people
- To inform nationally-important policy and practice for trauma care by combining and analysing two currently-separated datasets, while simultaneously strengthening partnerships among researchers, knowledge users and data controllers and analysts

# WP1: Proof-of-concept

- Obtain relevant permissions to, and optimise procedures for, combining databases
- Combine pseudonymised versions of MTA and ePCR dataset, utilising appropriate encrypted record identifiers, or combination of other identifiers if a unique identifier is not available
- Analyse pseudonymised dataset to explore major trauma incidents in Ireland that can inform prehospital services configuration and safe patient management
- Analyse pseudonymised dataset to develop a national clinical prediction rule for major trauma in Ireland, using international evidence as a basis

## WP2: Stakeholder engagement and consensus for ongoing dataset combination and utilisation

- Use stakeholder collective intelligence engagement techniques to explore best-practice mechanisms for ongoing, GDPR-compliant combining of ePCR and MTA datasets in the future.
  - A report will be provided that will inform logistics requirements, detailing the following:
    - Opinions of representatives of Data Protection Commissioner, HSE Data Protection Officer, Minister of Health, PPI, clinicians, etc.
    - Potential addition of new data fields to databases, e.g. Patient-reported outcomes (PROs)
- **Note:** Stop/Go point for WP3

## WP3: Geospatial implications of major trauma services

- Explore geospatial attributes in relation to major trauma incidents, road and air ambulance services, pre-hospital triage and the patient journey
  - Re-combine data with geospatial variables

# Dissemination & Communication

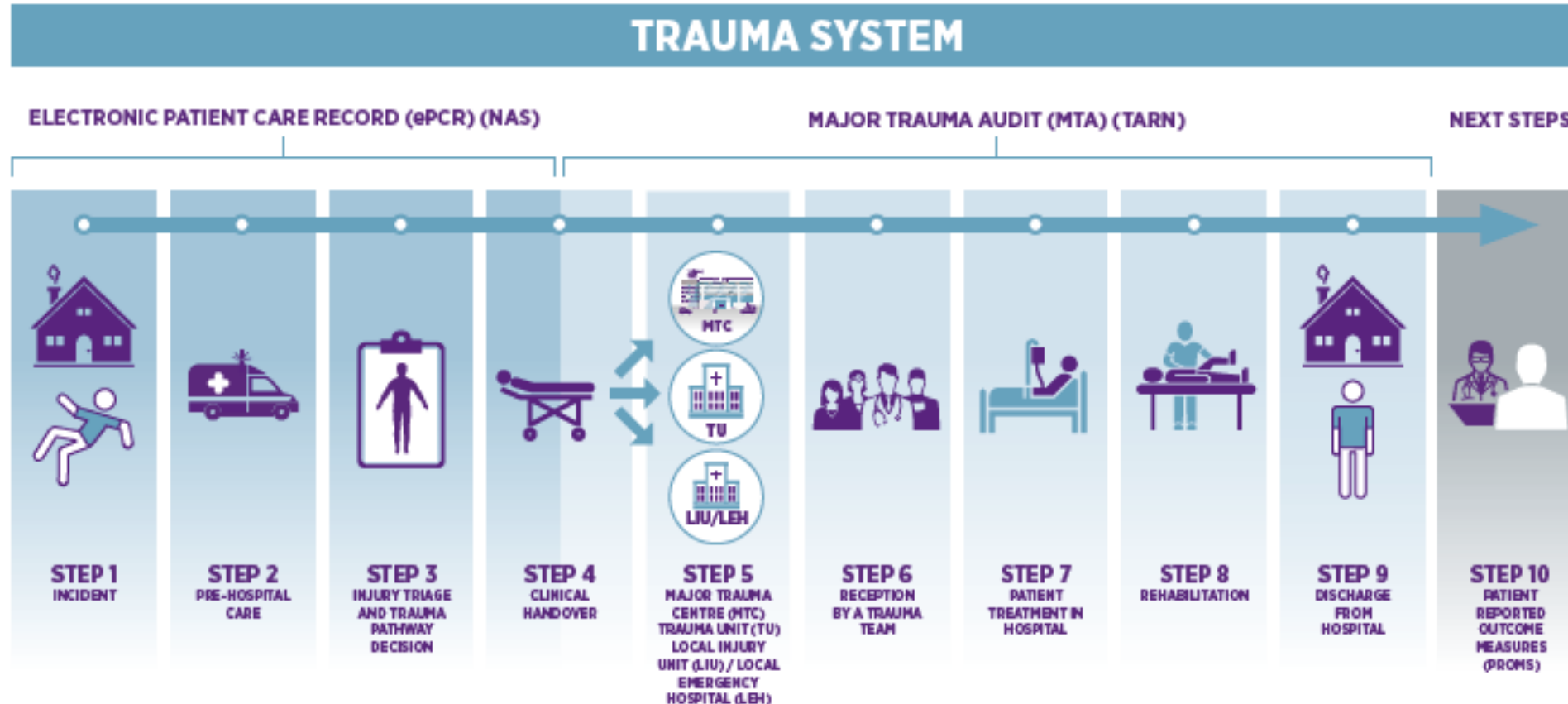
## Mechanisms

- Social media
- Website
- Peer-reviewed papers
- National/International conferences
- Online seminars

## Audiences

- Policy-makers
- Knowledge Users
- Open Science
- Academic/Clinical
- Public:
  - Including PPI-informed strategies

# Vision: New seamless Trauma database with PROs?





# Timeline & Funding

- 36 month project
  - 21 month Stop/Go decision
- Commence proper on 4<sup>th</sup> July
- This research is funded by the Health Research Board Secondary Data Analysis Projects, 2021-2024 (SDAP-2021-006)

# Questions?

Contact: [fdoyle4@rcsi.ie](mailto:fdoyle4@rcsi.ie)

