Access to major trauma data collected and collated by VSTORM is guided by strict protocols and procedures to ensure that privacy and other ethical principles are maintained at all times. Provision of data to VSTORM, particularly since patient consent is not obtained from the outset, is subject to strict guidelines and the study protocol as submitted to all hospital, DHS and Monash University ethics committees. In particular, specific measures have been put in place to maintain the confidentiality of personal identifying information.

This document outlines the VSTORM Data Access policy, as agreed to by the State Trauma Committee (STC), a Department of Health (DoH) advisory committee. Access to data is subject to the approval of the DoH.

**FORMAL POLICY FOR DIRECT ACCESS TO, AND EXTRACTION OF, DATA FROM THE MAJOR TRAUMA REGISTRY**

The following data access policy has been adopted:

1. Access to the data is subject to the Specific Access Guidelines given on the next page.
2. Only VSTORM staff who report directly to the Head of VSTORM have direct access to the Major Trauma Registry data base.
3. All uses of the Major Trauma Registry, in whatever context, must receive prior approval from the Head of VSTORM and/or DoH, through the steering committee. In some instances, specific hospital ethics committee approval is also required.
4. Any material to be published using VSTORM data must be seen by the VSTORM steering committee before it is released for publication.
5. “Deidentified aggregate data will be provided to researchers under the ‘Guidelines for Access to Data Collected by VSTORM’ Each research project requiring disclosure of data from the registry to third party researchers will need to seek ethics approval for their project and approval from the registry steering committee.”
6. Only requests that meet Specific Access Guidelines 1 and 5 (see next page) will be provided free of charge, unless a large number of such requests are made. This will be reviewed from time-to-time. The provision of data for all other data requests (specific access guidelines 2-4) will be subject to a fee-for-service. See Data Access Fees document for an explanation of these.
7. All third party requests for access to VSTORM data must take appropriate timelines into account as these requests will need to be scheduled along with routine VSTORM tasks. As a general rule, requests for data under Specific Access Guidelines 1 and 5 will take 2-4 weeks to complete. Data cannot be supplied within 2 weeks of a request. All other requests must be first made to the Head, VSTORM who will then table such request at the next VSTORM Steering Committee meeting. Steering committee meetings are held quarterly and data cannot be extracted until approval is given. Under exceptional circumstances, when data is required...
earlier, the Head of VSTORM and DHS may convene a 'special meeting' to consider specific data requests. Once approval has been received, it will take 2-4 weeks to supply the data.

8. All data requests must be formally lodged via email to (susan.mclellan@med.monash) or post to: Sue McLellan, Data Manager, VSTORM, Department of Epidemiology and Preventive Medicine, Monash University, Alfred Centre, 99 Commercial Road, Melbourne, VIC 3004.

VSTORM SPECIFIC ACCESS GUIDELINES

1. Where only summary data is requested and this is available from the quarterly reports (after formal acceptance of the report by the STC which is usually 4 months after the end of the quarter), this information can be provided by VSTORM staff. Such provision of data would not require steering committee advice but VSTORM will require a formal request in writing and will keep a record of such requests. The steering committee will be given a summary record of such requests on a quarterly basis. A caveat and conditions of use statement will be provided with the data.

2. All requests for other aggregate data must be in writing to the Head of VSTORM. The Head of VSTORM will take the data request to the next steering committee meeting. A decision on whether to grant access to the data will be considered following advice from the steering committee. At no stage will data summaries that could identify hospitals or patients be provided. If a researcher requires data from a particular hospital or hospitals, a specific ethics application approval from that hospital(s) will be required before data is able to be made available. This ethics approval should be made jointly with VSTORM. A caveat and conditions of use statement will be provided with the data.

3. No requests by third parties for direct access to unit records will be approved under any circumstances as this contravenes confidentiality and data access polices as required under the privacy legislation and ethics agreements. However, researchers may request VSTORM to undertake specific analyses of data. In all cases, the researchers would be provided with aggregate data only. Once again, a formal written request needs to be made to VSTORM for subsequent advice from the steering committee. If a researcher requires data from a particular hospital or hospitals, a specific ethics application approval from that hospital(s) will be required before data can be made available. This ethics approval should be made jointly with VSTORM.

4. Deidentified aggregate data will be provided to researchers under the ‘Guidelines for Access to Data Collected by VSTORM’ Each research project requiring disclosure of data from the registry to third party researchers will need to seek ethics approval for their project and approval from the registry steering committee.

5. If a hospital or ambulance service makes a specific request for its own performance data, this should be provided by VSTORM. No data that could specifically identify a patient would be provided. All requests for this level data should be made in writing to the Head, VSTORM. Whilst such data requests would not require specific steering committee advice, VSTORM will notify the steering committee of such requests.