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# A BILL FOR AN ACT

RELATING TO TRAUMA.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1       SECTION 1. The legislature has recognized that in Hawaii  
2 injury is the leading cause of death for persons between the  
3 ages of one to forty-four and, therefore, the improvement of  
4 trauma care in Hawaii is a public health priority.

5       By Act 305, Session Laws of Hawaii 2006, the department of  
6 health was charged with the continuing development and operation  
7 of a comprehensive statewide trauma system to save lives and  
8 improve outcomes of injured patients. To improve patient care,  
9 a comprehensive trauma system requires the systematic review of  
10 information related to patient care and system performance by  
11 all parties involved in a protected environment that supports  
12 participation and frank discussion. The importance of  
13 protecting peer review of health care provided is recognized in  
14 Hawaii by statute in section 624-25.5, Hawaii Revised Statutes.  
15 The department of health's child death review is also protected  
16 under sections 321-341 and 321-345, Hawaii Revised Statutes.  
17 This measure seeks to establish that statewide emergency and  
18 trauma system multiagency and multidisciplinary quality



1 assurance and peer review committees convened and conducted by  
2 the department of health for the purposes of improving patient  
3 care, have similar protections as those committees formed by  
4 hospitals and health maintenance organizations.

5 SECTION 2. Section 321-230, Hawaii Revised Statutes, is  
6 amended to read as follows:

7 "§321-230 Technical assistance, data collection,  
8 evaluation. (a) The department may contract for technical  
9 assistance and consultation, including but not limited to  
10 categorization, data collection, and evaluation appropriate to  
11 the needs of the state system. The collection and analysis of  
12 statewide emergency medical services data, including pediatrics,  
13 trauma, cardiac, medical, and behavioral medical emergencies,  
14 shall be for the purpose of improving the quality of services  
15 provided.

16 The department may implement and maintain a trauma registry  
17 for the collection of information concerning the treatment of  
18 critical trauma patients at state designated trauma centers, and  
19 carry out a system for the management of that information. The  
20 system may provide for the recording of information concerning  
21 treatment received before and after a trauma patient's admission  
22 to a hospital or medical center. All state designated trauma



1 centers shall submit to the department [~~of health~~] periodic  
2 reports of each patient treated for trauma in the state system  
3 in such manner as the department shall specify.

4 To analyze, evaluate, and improve the statewide trauma  
5 system and the services it provides to the public, the  
6 department may form multidisciplinary and multiagency quality  
7 assurance and peer review committees that shall be exempt from  
8 chapter 92. These committees shall comprise representatives of  
9 trauma, emergency, and tertiary care providers and agencies and  
10 shall review patient care records and system performance and  
11 make recommendations to the department for system improvement.

12 For the purposes of this subsection, "categorization" means  
13 systematic identification of the readiness and capabilities of  
14 hospitals and their staffs to adequately, expeditiously, and  
15 efficiently receive and treat emergency patients.

16 (b) The department shall establish, administer, and  
17 maintain an aeromedical emergency medical services system  
18 designed to collect and analyze data to measure the efficiency  
19 and effectiveness of each phase of an emergency aeromedical  
20 program.



1           The aeromedical emergency medical services system shall  
2 serve the emergency health needs of the people of the State by  
3 identifying:

4           (1) The system's strengths and weaknesses;

5           (2) The allocation of resources; and

6           (3) The development of rotary-wing emergency aeromedical  
7 services standards;

8 provided that emergency helicopter use, including triage  
9 protocols, shall be based on national aeromedical triage and  
10 transport guidelines established by the Association of Air  
11 Medical Services, the American College of Surgeons, and the  
12 National Association of Emergency Medical Service Physicians.  
13 The department, in the implementation of this subsection, shall  
14 plan, coordinate, and provide assistance to all entities and  
15 agencies, public and private, involved in the system.

16           (c) The department shall use an emergency aeromedical  
17 services quality improvement committee comprised of  
18 representatives of trauma, emergency, and tertiary care  
19 physicians and providers to analyze information collected from  
20 the aeromedical quality improvement performance measures as  
21 established by the American College of Surgeons, and to



1 recommend system standards and resources to maintain and improve  
2 the Hawaii emergency aeromedical services system.

3 (d) No individual participating in the review of patient  
4 care records and system performance as part of the department's  
5 multidisciplinary and multiagency quality assurance and peer  
6 review committees as set forth in this part may be questioned in  
7 any civil or criminal proceeding regarding information presented  
8 in or opinions formed as a result of participation in those  
9 reviews. Nothing in this subsection shall be construed to  
10 prevent a person from testifying to information obtained  
11 independently of the department's multidisciplinary and  
12 multiagency review of patient care records and system  
13 performance, or which is public information, or where disclosure  
14 is required by law or court order.

15 (e) Information held by the department as a result of  
16 patient care records and system performance reviews conducted  
17 under this part is confidential and is not subject to subpoena,  
18 discovery, or introduction into evidence in any civil or  
19 criminal proceeding, except that patient care records and system  
20 performance review information otherwise available from other  
21 sources is not confidential or immune from subpoena, discovery,



1 or introduction into evidence through those sources solely  
2 because they were provided as required by this part.

3 (f) To the extent that this section conflicts with other  
4 state confidentiality laws, this section shall prevail."

5 SECTION 3. Statutory material to be repealed is bracketed  
6 and stricken. New statutory material is underscored.

7 SECTION 4. This Act shall take effect upon its approval.



**Report Title:**

Trauma

**Description:**

Provide statutory protection from discovery for the Department of Health trauma care multiagency and multidisciplinary peer review and quality assurance committees. (HB2575 HD1)

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*

