

Trauma Related Issues Database (TRID)

Reporting Form V5

**Please use this form to notify the Network of an adverse event as soon as possible**

**Email to stephen.littleson@nhs.net**

**Part 1 - Notification**

|  |
| --- |
| Datix or Other Trust Reference Number: Reporting Clinician:Reporting Organisation:Date of notification: |

**Part 2 – Patient Details**

|  |  |
| --- | --- |
| Patient name |  |
| Date of Birth |  |
| NHS Number |  |

**Part 3 – Pre-hospital Details**

|  |  |
| --- | --- |
| If the issue is pre-hospital related please provide the **case number** found on the top of the Patient Report Form (PRF) - not the PRF number. This will speed up the investigation process. |  |

**Part 4 – Case Details**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Issue 1 | Issue 2 | Issue 3 |
| Date the issue occurred?  |  |  |  |
| Time the issue occurred? |  |  |  |
| Trust / organisation the issue is about? | Choose an item. | Choose an item. | Choose an item. |
| *Other, if not on above list* |  |  |  |
| Issue location | Choose an item. | Choose an item. | Choose an item. |
| *Other, if not on above list* |  |  |  |
| Issue Type | Choose an item. | Choose an item. | Choose an item. |
| *Other, if not on above list* |  |  |  |
| Issue Team | Choose an item. | Choose an item. | Choose an item. |
| *Other, if not on above list* |  |  |  |
| Issue Description? – please provide as much detail as possible inc time-lines |  |  |  |
| What actions have been taken to date? |  |  |  |
| What actions are outstanding? |  |  |  |
| Please indicate if you wish to discuss this case at your Network Board Meeting or escalated to the Performance & Quality Group | \*Internal (Trust v Trust only)\*Network Board Meeting\*PaQ Group*\*Delete appropriately* | \* Internal (Trust v Trust only)\*Network Board Meeting\*PaQ Group*\*Delete appropriately* | \*Internal (Trust v Trust only)\*Network Board Meeting\*PaQ Group*\*Delete appropriately* |