

I. Committee Purpose

The Trauma Committee is responsible for the oversight of the trauma system for TSA-E, including the TSA-E Regional Trauma System Plan. Further details of committee responsibilities are defined under Article IX of the NCTTRAC Bylaws.

II. Committee Responsibilities

- A. Establish standards and procedures for the Trauma Committee.
- B. Strategize using diverse resources to reduce morbidity and mortality due to trauma.
- C. Create broad stakeholder representation while working to provide an opportunity to share resources leading to the development, operation, and evaluation of trauma education and advocacy within the 19 counties served.
- D. Provide guidance, in the development of pre-hospital assessment tools and treatment guidelines related to trauma care to the EMS and Air Medical Committees.
- E. Organize, support and/or coordinate health care evidenced-based education identified through the NCTTRAC trauma needs assessments.
- F. Provide oversight to the Trauma Registry Workgroup.
- G. The committee serves as a source to identify trauma expert resources available in TSA-E to members and community partners.

III. Committee Chair/Chair Elect Responsibilities

A. Chair

The Committee Chair serves as the principal liaison between the committee and the Board of Directors with responsibilities that include, but are not limited to:

- 1. Knowledge of the Bylaws.
- 2. Scheduling meetings.
- 3. Meeting agenda and notes.
- 4. Providing committee report to the Board of Directors at least quarterly.
- 5. Annual review of Trauma System Plan, Trauma Destination Guidelines, committee SOP and SPI indicators.
- 6. Knowledge and dissemination of GETAC activities to committee members and the Board of Directors.

B. Chair Elect

The Chair Elect assists the Chair with committee functions and assumes the Chair responsibilities for committee activity and meeting management in the temporary absence of the Chair. The Chair Elect may serve in lieu of the Trauma Committee Chair for Board of Directors responsibilities.

- 1. The Chair Elect must be an employee of a NCTTRAC Member in good standing as defined in the NCTTRAC Bylaws.
- 2. The Chair Elect automatically ascends to the Chair position at the end of the current Chair's term.
- 3. The Chair Elect position will be voted on by the Trauma Committee every two years or when this position has been vacated by the incumbent.

IV. Medical Director

- A. Medical Director represents trauma care issues at Medical Directors Committee.
- B. Medical Director can facilitate trauma medical directors meeting as a subgroup of Medical Directors Committee.

V. Committee Product

- A. Trauma System Plan.
- B. Trauma Pre-hospital assessment tools/guidelines.
- C. Committee SOP.
- D. Committee SPI Tool.
- E. Regional Communication Center Trauma Transfer Protocol.

VI. Work Group

The committee may ask the NCTTRAC Chair for an Ad Hoc work groups as necessary to address specific issues.

Trauma Registry Workgroup

- 1. Assist with identifying and evaluating regional data needs and/or requirements.
- 2. Information sharing related to National Trauma Data Standard (NTDS), state registry, or Trauma Quality Improvement Program.
- 3. Best practice sharing.

VII. Definitions

Not applicable.

VIII. Procedures (Meeting, Agenda and Minutes)

The Trauma Committee shall perform its responsibilities with an organized approach utilizing the following procedure:

- A. The date, time and location of all scheduled meetings will be posted at least ten (10) days in advance on the NCTTRAC website calendar.
- B. The committee will meet at least quarterly.
- C. All meetings are held as open meetings.
- D. Agendas will be provided and be prepared by the committee chair.
- E. A sign in sheet will be provided at each meeting.
- F. Each meeting will have notes.
- G. Agendas and meeting notes will be forwarded to NCTTRAC office and administrative staff within 20 days after the meeting for posting. The attendance will be turned in at the end of the meeting.
- H. Members of the committee may access copies of meeting agendas and notes on the NCTTRAC website.

IX. Medical Director Committee Liaison

Committee has medical director representation in accordance with Bylaws

X. Liaison

Affiliated Liaison Groups

- A. Texas EMS Trauma & Acute Care Foundation (TETAF)
- B. Governor's EMS & Trauma Advisory Council (GETAC) Trauma Committee
- C. Texas Trauma Coordinators Forum (TTCF)

XI. SPI Indicators

- A. Hospitals will meet and maintain the appropriate trauma facility designation at all times.
- B. Transfers will be to a higher level of designated trauma facility (single system injuries with ISS less than 9 excluded).
- C. Pediatric trauma patients will only be transferred one time to the most appropriate facility.
- D. All in-patient pediatric trauma transfers will be reviewed through both hospital trauma performance improvement processes and the NCTTRAC SPI Committee process.
- E. Pediatric trauma patients in need of ICU care will be transferred to a tertiary care center with pediatric ICU capability within one hour of identifying the need for ICU care.
- F. All pediatric transfers occurring within Trauma Service Area-E will be initiated and remain in NCTTRAC area as the capacity of the tertiary care facilities allow and the patient's condition dictates.
- G. Hospitals will meet the EMS provider and accept care of all patients, within 15 minutes.
- H. Trauma patients will only be transferred one time to the most appropriate facility.
- I. Ground transport will be available within 30 minutes for transfer.
- J. Air-Medical Services will be available for transport within 60 minutes.
- K. All trauma patient transfers will be managed within Trauma Service Area-E as the capacity of the tertiary care facilities allow and the patient's condition dictates.

XII. Annual Committee Goals

- A. Trauma centers within TSA-E will have an identified train-the-trainer for the Stop the Bleed BCON course.
 - 1. Goal: 50% by end of 2017
- B. Traumatically injured patients requiring transfer will be transferred within two hours of arrival to emergency department.
 - 1. Goal: 40% by end of 2017

XIII. Unobligated Budget Request

Recommend to the Board of Directors' financial backing or support of Committee related public education efforts across the 19 county region.

XIV. Core Group

- A. No unique core group, as outlined in Article IX of the bylaws, has been identified for this committee
- B. In accordance with the NCTTRAC Bylaws, committee-voting authority afforded to ED Operations Committee representatives includes only NCTTRAC members in good standing.

XV. Membership Requirements

Not applicable.

XVI. Attendance Requirements

While committee attendance is highly encouraged for all RAC members, there are no specific attendance requirement for this committee.