

I. Committee Purpose

The System Performance Improvement (SPI) Committee is responsible for shared oversight of emergency healthcare system performance improvement activities with individual service line Committees of NCTTRAC. The SPI Closed Committee functions support detailed reviews of Performance Improvement (PI) Indicators and referred PI events as afforded by Texas Statute and Rule. The SPI Committee will also provide guidance in the development and review of hospital and pre-hospital assessment tools, regional plans and treatment guidelines, and the Committee SOP. The committee will interface with other RAC committees, professional associations appropriate to their service lines, and the Governor's EMS and Trauma Advisory Council (GETAC).

II. Committee Responsibilities

a. The SPI Committee shall:

1. Review system performance standard indicators with individual service line Committees of NCTTRAC.\
2. Review, evaluate, and report EMResource utilization.
3. Make recommendations to the Executive Committee of the Board of Directors for appropriate designation/accreditation of hospitals related to initial or changes to designation/accreditation as requested/required by the Department of State Health Services (DSHS).
4. Maintain oversight for the Regional Communications Center (RCC).
5. Maintain service line Core Group representation for PI activities.
6. Further details of committee responsibilities are defined under Article IX of the NCTTRAC Bylaws.

III. Committee Leadership 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 Committee report to the Board of Directors at least quarterly
4. Standard Operating Procedures
5. The term of the Committee Chair is two years.
6. The Committee Chair must be a documented representative of a NCTTRAC member in good standing as defined in the Membership & Participation SOP.
7. The Committee Chair may not simultaneously hold another elected position in NCTTRAC.
8. The Committee Chair holds one vote on the Board of Directors representing the collective vote of the SPI Committee.
9. The Committee Chair only votes in the event of a tie at the SPI Committee meeting.
10. The Committee Chair has the authority to call or postpone committee meetings.

b. Chair Elect Responsibilities

1. The Chair Elect may serve in lieu of the SPI Committee Chair for Board of Directors responsibilities including voting.
2. The Chair Elect assist with committee functions and conducts committee activities in the absences of the Chair.
3. The Chair Elect will take meeting notes and forwarding to Committee Chair.
4. The Chair Elect must be a documented representative of a NCTTRAC member in good standing as defined in the NCTTRAC Bylaws.
5. The Chair Elect automatically ascends to the Chair position at the end of the current Chair's term.
6. The Chair Elect position will be voted on by the SPI Committee Core Group every two years or when this position has been vacated by the incumbent.

c. Medical Director Responsibilities

1. The Medical Director represents System Performance Improvement care issues on the Medical Directors Committee.
2. The Medical Director can facilitate System Performance Improvement medical directors meeting as a subgroup of the Medical Directors Committee.
3. Must be a documented representative of a NCTTRAC member in good standing.

IV. Core Group

- a. Representation: The SPI Committee will be divided into nine (9) subset SPI Core Groups and will be comprised of the SPI Committee Chair, SPI Committee Chair Elect, SPI Medical Director and the following:

1. Air Medical Committee
 - a. Air Medical Committee Chair
 - b. Air Medical Committee Chair Elect
 - c. Air Medical Medical Director
 - d. Two (2) Elected Air Medical Committee Members
2. Cardiac Committee
 - a. Cardiac Committee Chair
 - b. Cardiac Committee Chair Elect
 - c. Cardiac Medical Director
 - d. Two (2) Elected Cardiac Committee Members
3. Emergency Department Operations (ED Ops) Committee
 - a. ED Ops Committee Chair
 - b. ED Ops Committee Chair Elect
 - c. ED Ops Medical Director
 - d. Two (2) Elected ED Ops Committee Members
4. EMS Committee
 - a. EMS Committee Chair
 - b. EMS Committee Chair Elect
 - c. EMS Medical Director
 - d. Two (2) Elected EMS Committee Members
5. Pediatric Committee
 - a. Pediatric Committee Chair
 - b. Pediatric Committee Chair Elect

- c. Pediatric Medical Director
 - d. Two (2) Elected Pediatric Committee Members
- 6. Perinatal Committee
 - a. Perinatal Committee Chair
 - b. Perinatal Committee Chair Elect
 - c. Perinatal Medical Director
 - d. Two (2) Elected Perinatal Committee Members
- 7. Regional Emergency Preparedness Committee (REPC) Members
 - a. REPC Committee Chair
 - b. REPC Committee Chair Elect
 - c. Disaster (REPC) Medical Director
 - d. Two (2) Elected REPC Members
- 8. Stroke Committee
 - a. Stroke Committee Chair
 - b. Stroke Committee Chair Elect
 - c. Stroke Medical Director
 - d. Two (2) Elected Stroke Committee Members
- 9. Trauma Committee
 - a. Trauma Committee Chair
 - b. Trauma Committee Chair Elect
 - c. Trauma Medical Director
 - d. Two (2) Elected Trauma Committee Members

- V. Committee Products**
- a. SPI Committee SOP
 - b. SPI Performance Indicators
 - c. SPI Referral Form
 - d. SPI Referral Feedback Form
 - e. Trauma Designation Letter of Support Review Forms
 - f. Stroke Designation Letter of Support Review Forms
 - g. Neonatal Designation Letter of Support Review Forms
 - h. Any Other State Designation Letter of Support Review Forms

VI. Procedures (Meetings, Agenda, and Notes)

The SPI 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 should meet at least quarterly.
- c. Agendas will be provided and be prepared by the Committee Chair.
- d. A sign in sheet will be provided at each meeting by NCTTRAC staff.
- e. Each meeting will have notes taken by the Committee Chair Elect.
- f. The committee should follow the NCTTRAC approved standard format for the meeting agenda and notes.
- g. The committee should submit meeting notes and attendance rosters to NCTTRAC staff within 48 hours following each meeting as a record of committee activities.
- h. SPI Committee and Core Group members will sign a confidentiality statement prior to the start of each meeting.

- VII.** Medical Director Committee Liaison
The SPI Committee has medical director representation in accordance with the Bylaws.

- VIII.** Affiliated Liaison Groups
 - a. Emergency Physicians Advisory Board (EPAB)
 - b. Biotel
 - c. Texas Trauma Coordinators Forum (TTCF)

- IX.** Annual Committee Smart Goals
 - a. Annual review of committee SOP, SPI Referral Form, and PI Standard Indicators
 - b. Identify key PI reports

- X.** Attendance Requirements
 - a. SPI Committee Leadership will attend at least 50% of all scheduled meetings.
 - b. Committee SPI Core Group members will attend at least 50% of all called meetings.
 - c. If SPI Core Group Members do not maintain active participation, the SPI Chair and service line chair will mutually agree upon removal and replacement of the SPI Core Group member.