

1. Committee Purpose and Responsibilities

- 1.1. The Emergency Department Operations (ED Ops) Committee is responsible for improving Emergency Department operations in TSA-E by engaging in and supporting the development and implementation of clinical guidelines and processes and enhancing communication, collaboration and alignment amongst the EDs, ED partners in care, and other NCTTRAC Committees in TSA-E. The ED Ops Committee provides guidance in the development and review of hospital and pre-hospital assessment tools, regional plans and treatment guidelines, and the Committee SOP. Additionally, the committee will interface with other RAC committees, professional associations appropriate to the services, and the Governor's EMS and Trauma Advisory Council (GETAC).
- 1.2. Create broad stakeholder representation to provide an opportunity to discuss issues related to patient throughput, clinical care, and quality outcomes in ED care.
- 1.3. Establish and/or provide support in the development and implementation of standards, guidelines, protocols and tools to improve ED operations and clinical care.
- 1.4. Review and share relevant literature and resources on best practices, research, and current issues and trends.
- 1.5. Review, discuss and make recommendations on process and quality improvement initiatives based on data reports from EMResource and other local, regional, and state data repositories.
- 1.6. Serve as a resource to ED nursing and physician leaders in operational issues, professional issues, and NCTTRAC policy and procedure.

2. Sub-Committees and Work Groups

- 2.1. *Not Applicable*

3. Committee Chair/Chair Elect Responsibilities

3.1. Chair

- 3.1.1. 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:
 - 3.1.1.1. Knowledge of the Bylaws.
 - 3.1.1.2. Scheduling meetings.
 - 3.1.1.3. Meeting agenda and notes.
 - 3.1.1.4. Providing committee report to the Board of Directors.
 - 3.1.1.5. Annual review of ED Ops Plans, Guidelines, committee SOP, and SPI indicators.
 - 3.1.1.6. Provide or arrange for knowledge and dissemination of appropriate liaison group activities to committee members and the Board of Directors.
- 3.1.2. The Chair must be a documented representative of a NCTTRAC member in good standing as defined in the NCTTRAC Membership and Participation SOP.
- 3.1.3. The Chair will serve a one-year term of office, beginning at the start of the Fiscal year, and be succeeded by the Chair Elect at the end of the Fiscal Year.

3.2. Chair Elect

- 3.2.1. The Committee 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 ED Ops Committee Chair for Board of Directors responsibilities.

- 3.2.2. The Chair Elect must be a documented representative of a NCTTRAC member in good standing as defined in the NCTTRAC Membership and Participation SOP.
- 3.2.3. The Chair Elect automatically ascends to the Chair position at the end of the current Chair's term or if the Chair position is otherwise vacated.
- 3.2.4. The Chair Elect position will be voted on by the ED Ops Committee annually or when the incumbent has vacated this position.

4. Committee Medical Director

- 4.1. The ED Ops Committee Medical Director is responsible for
 - 4.1.1. Participating directly with their service line committee
 - 4.1.2. Establishing and maintaining a standing coordination method with their service line peers
 - 4.1.3. Maintaining availability for coordinating with other committees' Medical Directors to recommend a minimum standard of care for providers participating in the trauma, acute, emergency healthcare and disaster response systems of TSA-E
- 4.2. The ED Ops Committee Medical Director provides current physician insight and involvement in support of the ED Operations Committee and its responsibilities, including:
 - 4.2.1. Identifying and assessing regional performance improvement standards, formulating strategies and making recommendations to the committee to ensure that the best possible standards of healthcare can be met within TSA-E.
 - 4.2.2. Active partnership in the coordination and support of the following service line committee products (see appendix A for the Coordination Flow Chart):
 - 4.2.2.1. Guidelines
- 4.3. The ED Ops Committee Medical Director must be a documented representative of a NCTTRAC member in good standing as defined in the NCTTRAC Membership and Participation SOP.
- 4.4. The ED Ops Committee Medical Director position will be voted on by the ED Operations Committee annually, with each Fiscal Year, or if otherwise vacated.
- 4.5. The ED Ops Committee Medical Director should be prepared, with NCTTRAC staff assistance, to facilitate a peer group of Emergency Department medical directors (by email or meeting) in support of ED Ops Committee efforts as appropriate.
- 4.6. The ED Ops Committee Medical Director will be seated as a voting representative on the NCTTRAC Medical Directors Committee.
- 4.7. The ED Ops Committee Medical Director represents ED Ops care issues at the Medical Directors Committee.
- 4.8. The ED Ops Committee Medical Director may facilitate an ED Ops medical directors meeting as a focus group of the Medical Directors Committee.

5. Committee Representation

- 5.1. In accordance with NCTTRAC Bylaws Article IX, there is not a voting core group identified within the ED Operations Committee. (the absence of an identified core group opens voting rights at the committee level to all NCTTRAC Members in good standing)
- 5.2. Represented organizations that provide Emergency Department services in TSA-E and maintain NCTTRAC Membership in good standing.

6. Committee Attendance

6.1. While attendance is highly encouraged in support of meaningful participation, there are no specific attendance requirements at the committee level for the ED Operations Committee.

7. Committee Active Participation

7.1. Not Applicable

8. Committee Procedures (Meeting, Agenda and Notes)

8.1. The ED Ops Committee shall perform its responsibilities with an organized approach utilizing the following procedure:

8.2. The date, time and location of all scheduled meetings will be posted at least ten (10) days in advance on the NCTTRAC website calendar.

8.3. The committee will meet at least quarterly.

8.4. All meetings are held as open meetings.

8.5. Agendas will be prepared and submitted to NCTTRAC Staff by the committee chair.

8.6. A sign in sheet will be provided at each meeting by NCTTRAC Staff.

8.7. Each meeting will have notes.

8.8. 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

8.9. Copies of meeting agendas and notes will be available on the NCTTRAC website.

9. Committee Liaisons

9.1. Governor's EMS and Trauma Advisory Council (GETAC)

9.2. Texas Emergency Nurses Association (ENA)

9.3. Texas EMS Trauma and Acute Care Foundation (TETAF)

9.4. Dallas Fort Worth Hospital Council Foundation (DFWHC)

10. Standing Committee Obligations

10.1. Annual Review of the ED Ops Committee SOP

11. Projected Committee Goals, Objectives, Strategies, Projects

11.1. Define and develop metrics and indicators for tracking and trending issues affecting ED operations at a regional level.

11.2. NCTTRAC's "Accountability Scorecard" spreadsheet will be used to document commitments and progress with associated efforts.

12. System Performance Improvement (SPI)

12.1. The ED Ops Committee will support ED Ops SPI responsibility by establishing a standing meeting agenda item and corresponding accountability (e.g. appoint individual facilitator, workgroup or subcommittee).

12.2. At minimum, the committee will review, evaluate, and report ED Ops EMResource utilization and 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).

12.3. Closed ED Ops SPI meetings support detailed reviews of Performance Improvement (PI) Indicators and referred PI events as afforded by Texas Statute and Rule.

12.3.1. Representation:

12.3.1.1. ED Ops Committee Chair

12.3.1.2. ED Ops Committee Chair Elect

12.3.1.3. ED Ops Committee Medical Director

12.3.1.4. Two elected ED Ops Committee representatives

12.3.2. Closed ED Ops SPI meeting participants will sign a confidentiality statement prior to the start of each closed meeting.

12.3.3. Meeting notes, attendance rosters, and supporting documents of Closed ED Ops SPI meetings must be provided to NCTTRAC staff within 48 hours following each meeting to be secured as a confidential record of committee activities.

12.4. SPI Products

12.4.1. ED Ops SPI Indicators

12.4.2. ED Ops SPI Referral Form

12.5. SPI Indicators

12.5.1. Advisory/Closures

12.5.2. EMResource Hospital update compliance

13. Injury/Illness Prevention / Public Education

13.1. The ED Ops Committee will support ED Ops Injury/Illness Prevention and Public Education responsibility by establishing a standing meeting agenda item and corresponding accountability (e.g. appoint individual facilitator, workgroup or sub-committee).

13.2. Focus on injury prevention and education of the public health needs.

13.3. Create a broad stakeholder representation working to provide an opportunity to share resources leading to the development, operation, and evaluation of public education and injury/illness prevention efforts within TSA - E.

13.4. Base decisions on current Emergency Department trends and data, facts and assessment of programs and presented educational opportunities.

13.5. Organize; support and/or coordinate community evidenced based education and injury/illness prevention programs.

13.6. Recommend/support prevention priorities for TSA-E according to the injury/illness, geographic location, cost, and outcome.

13.7. Serve as a resource to identify prevention programs, events and other prevention resources available in TSA-E to members and community members.

13.8. Establish Ad Hoc Task Forces, as necessary, to address specific issues.

14. Professional Development

- 14.1. The Committee will support ED Ops Professional Development responsibility for all levels of providers by establishing a standing meeting agenda item and corresponding accountability (e.g. appoint individual facilitator, workgroup or subcommittee).
- 14.2. At minimum, the Committee will:
 - 14.2.1. Participate in the development of the Annual NCTTRAC Needs Assessment.
 - 14.2.2. Sponsor at least two classes annually based on needs assessment results.

15. Unobligated Budget Requests

- 15.1. Recommendations from the ED Ops Committee, coordinated through the Finance Committee, seeking approval from the Board of Directors for financial backing and execution authority in support of related initiatives, projects, and/or education efforts within TSA-E.

Appendices follow

Appendix A – Coordination Flowchart