****

**Standard Operating Procedure**

SOP Title: **Committees**

SOP NUMBER: **JRAC 1006**

SOP EFFECTIVE DATE: 02/15

SOP REVIEWED/REVISED: 04/2019

# OPERATING PROCEDURE:

**STANDING COMMITTEES**

1. The Executive Board will establish the following standing committees:
   1. Pre-hospital/AirMedical
   2. Trauma/Injury Prevention
   3. Acute Care/Education
   4. Ad Hoc committees to be assigned by Chair
   5. Meetings
      1. Committee chairs are appointed by the Regional Chair and approved by the Executive Board.
         1. Committee Chair may request a co-chair to be approved by the Executive Board.
      2. The Standing Committees Chair must be a member of the General Membership.
      3. The meetings of the standing committees are open to all members of the RAC and shall be held in a place suitable for conducting the business of the committee.
      4. Only the members of the standing committees are allowed to vote.
      5. The Chairs of each of these committees are responsible for the minutes of the meetings.
         1. The Secretary and Executive Director of the RAC must be provided a copy of the minutes to retain as permanent records after any revisions that may be needed.
      6. All committees meets monthly. The committees may choose to meet more often if actively working on a project.
      7. Requests and suggestions are made during the committee meetings and, if they have merit, are brought before the regular General Membership meetings.
      8. Complaints are handled during the committee meetings and attempts to resolve them are made in the committee. If a satisfactory decision by all parties cannot be achieved, the matter is brought before the Executive Board Committee to resolve the issue.
      9. A quorum for conducting the business of each standing committee, General Membership, and Executive Board Committee shall not be less than 50% plus 1 of the members of that committee.
      10. Meetings may be conducted by conference call.
      11. Attendance and meeting requirements are in the Texas J RAC Participating Entity Requirement SOP
      12. The Committee Chair will submit draft minutes, attendance and all other information to the TXJRAC Webmaster for inclusion on the webpage no later than 14 days after the meeting. Approved minutes will be posted within 5 days.
2. Committees are made up of the general members
   1. All committee members will attend 100% of the Quarterly meetings and 75% of the monthly meetings
   2. Pre-Hospital/Air Medical
      1. The purpose of the Pre-Hospital/Air Medical committee is to provide oversight of Pre-Hospital care and Air Medical Transport.
      2. Yearly this committee will view the regional protocols and other task assigned by the Chair.
      3. Establish, collect and report on PI relevant to Pre-hospital/Air Medical care.
         1. PI indicators will be established annually and approved by the Committee.
         2. PI reports will be submitted to the Committee according to the guidelines/timeframes established.
         3. Reports will be submitted in a format agreed upon by the Committee and submitted to the General Membership for approval.
      4. Complaints/concerns for Pre-hospital/Air Medical PI are submitted on a PI concern form to the Chair of the Pre-hospital/Air Medical committee.
      5. PI concerns will be reviewed at the quarterly Pre-hospital/Air Medical PI meeting for input, recommendations and action to be taken.
      6. The committee will review the Pre-hospital/Air Medical PI data to make recommendations for Injury Prevention and Education, to the Acute Care/Education Committee and the Trauma/Injury Prevention Committees.
   3. Trauma/Injury Prevention
      1. The purpose of the Trauma/Injury Prevention committee is work on Trauma related topics of the TXJRAC and to do Trauma PI for TXJRAC.
      2. Assist entities seeking Trauma Designation.
      3. Establish, collect and report on PI relevant to Trauma care.
         1. PI indicators will be established annually and approved by the Committee.
         2. PI reports will be submitted to the Committee according to the guidelines/timeframes established.
         3. Reports will be submitted in a format agreed upon by the Committee and submitted to the General Membership for approval.
      4. Complaints/concerns for Trauma PI are submitted on a PI concern form to the Chair of the Trauma committee.
      5. PI concerns will be reviewed at the quarterly PI meeting for input, recommendations and action to be taken.
      6. The committee will review the PI data to make recommendations for Injury Prevention, and to the Acute Care/Education Committee for education
   4. Acute Care/Education
      1. The purpose of the Acute Care/Education Committee is to handle topics related to Stroke, Cardiac and other issues related to the acute care areas of hospitals in TXJRAC.
      2. Assist entities to accomplish designation of their facility related to Stroke or Cardiac Care.
      3. Establish, collect and report on PI relevant to acute care.
         1. PI indicators will be established annually and approved by the Committee.
         2. PI reports will be submitted to the Committee according to the guidelines/timeframes established.
         3. Reports will be submitted in a format agreed upon by the Committee and submitted to the General Membership for approval.
      4. Complaints/concerns for Acute Care PI are submitted on a PI concern form to the Chair of the Acute Care committee.
      5. PI concerns will be reviewed at the quarterly PI meeting for input, recommendations and action to be taken.
      6. The committee will review the PI data to make recommendations for Injury Prevention, and to the Acute Care/Education Committee for education
   5. Perinatal Committee
      1. The purpose of the Perinatal Advisory Council is to collaborate with all regional facilities to improve the care delivered to the neonate and maternal patients, provide education and support to all facilities, and continue to decrease morbidity and mortality rates.
         1. Assists in seeking maternal and neonatal designations
         2. Establish maternal and neonatal projects for each quarter
         3. Maintain education dates on the PAC webpage for regional use
         4. Establish, collect, and report performance improvement to PAC
         5. Performance improvement indicators will be established annually and approved by the committee
         6. Performance improvement reports will be submitted to the committee according to the guidelines/time frames established
         7. Complaints/concerns are submitted on a PI form to the chair of the PAC committee
         8. PI concerns will be reviewed at the quarterly PI meeting for input, recommendations and actions to be taken.
         9. The committee will review the PI data to make recommendations for improvement in maternal care, neonatal care, project reviews/utilization, and regional education.
   6. Ad Hoc Committees:
      1. Ad Hoc committees may be formed at the discretion of the Chair or General Membership to work on projects for TXJRAC.
3. Requirements for Committee Chair:
   1. Committee Chairs will be appointed by the chair and submitted to the Executive Board for approval.
   2. There are no term limits for Committee Chairs. A Chair may serve so long as they are willing or until they are removed.
   3. Committee Chairs may be removed by the Executive Board Committee is accordance with and defined by the process in the TXJRAC By-Laws.
   4. Chairs are responsible for the completion and submission of minutes as defined above.
   5. Chairs are expected to deliver meaningful information and education to their committee members as well as the timely completion of other tasks/requirements as described above.