

National Major Trauma Nursing Group

Sub Group: Critical Care Trauma competencies

Terms of Reference

1. **Introduction:** At the National Major Trauma Nursing Group Meeting held June 2016, a group was convened with the purpose of developing Trauma Competencies for Critical Care (Adults). This group is in addition to groups convened at the same time for Trauma Wards (Adults) and for Paediatrics.

2. Aim:

The aim of the group is to help shape the future of critical care trauma nursing as a recognised sub-speciality area of expertise and practice.

The group will provide clinical and educational expertise in critical care trauma nursing to develop a Competency Framework for reference nationally.

3. Objectives

The key objectives of the group are:

- a. To identify trauma competencies specifically for Critical Care Areas (these being facilities primarily for the care of Level 3 Trauma Patients).
- b. To develop standards through the development of specialist competencies in Trauma Critical Care.
- d. The group shall collaborate with the other trauma sub groups to ensure consistency of standards for the competency development throughout the trauma patient pathway.
- e. The group shall refer to National Critical Care Networks to ensure consistency of standards for the competency development.
- f. The group shall access relevant resources both locally and nationally.
- g. The group will feedback on progress into the main National Major Trauma Nursing Group Meetings on a three monthly basis.

4. Membership:

The group shall consist of:

- a. Chair: The Group will be chaired by a nurse who is responsible for facilitating the group to achieve the objective i.e Developing National Trauma Competencies for the specialty of Critical Care.
- b. Vice-Chair: The Chair shall be supported by a Vice-Chair, who must be a nurse, who can deputise and undertake all the functions of the chair in their absence.
- c. Representation from nurses and educators working within or specialising in Trauma Critical Care
- d. Secretariat: A nominated member of the group will be responsible for taking and circulating minutes from the meetings.

5. Quorum:

To be quorate the following must be present at the meeting:

- a. Chair or Vice-Chair and
- b. A minimum of 4 members (includes via teleconferencing facilities) and
- c. A minimum of 4 Major Trauma Networks represented.

In the event that a meeting is not quorate the following will apply with respect to approval of motion/items:

- a. The motion/item will be sent to the members of the subgroup and full NMTNG via e-mail by the Chair, Vice-Chair or Secretariat.
- b. All members will have 2 weeks to respond with amendments/edits.
- c. A revised motion/item will then be sent to the full NMTNG for approval within 2 weeks. Where members fail to respond it will be assumed they approve of the motion/item.
- d. The Chair, Vice-Chair or Secretariat will then confirm the motion/item as approved.

6. Conduct of meetings:

- a. Meetings will be held quarterly.
- b. Meetings to be 1-2 hours in length.

7. Agreement and review:

These TOR to be discussed and reviewed on Friday 2nd September.