

# **The Terms of Reference for Council and its Committees, Sub-Committees, Special Interest Groups, and Working Groups**

Status for approval by the Board April 2025

## Amendment log

Issue	Issue Date	Additions/Alterations	Initials
1.0	March 2017	First version	GM
1.1	July 2017	For Council Approval	GM
1.2	June 2019	Proposed revisions for Council approval, updated EMTA, FASSGEM following Council approval in 2018 and minor amendments generally.	GM
1.3	June 2019	Addition of Paediatric Emergency Care Special Interest Group and EM Leaders Project Group, minor adjustment to Executive Committee TOR reflecting quorum.	GM
1.3	July 2019	Council approved updated version to include alteration to Exec quorum	GM
1.4		Addition of Environmental SIG & PHEM Committee	GM
1.5	September 2020	Update with minor edits, revised structure chart, addition of Groups: Anti Bullying SIG, PEM PAG, PHEMPAG, EDI Committee & Women In EM SIG Update to EMTA TOR. Additional clause para 33 page 9. Approved by Council 17 September 2020.	GM
2.0	Annual Review June 2021	Updating ahead of new Trustee Board to reflect new delegations, new Corporate Governance TOR as approved by Council;  adding ESIG Green ED Working Group as approved by Council;  updating RCEM Foundation to RCEM Fundraising as approved by Council;  updated Regional & National Board TORs as approved by Council;  adding in new MRCEM sub-Committees and adjustments to FRCEM Sub-Committees to reflect Curriculum changes;  adding new Education Skills Sub-Committee;  adding new Ultrasound Education & Training Sub-Committee (UETSC);  updating RCEMlearning Editorial Board;  Adding new Recruitment Sub-Committee and various minor edits.	GM
3.0	Updating some TORs	Creation of Trustee Board TOR	GM

		<p>Minor edits to: Council, Corporate Governance Committee.</p> <p>Change of name of FASGEM to EMSAS</p> <p>Edits to ACP Forum TOR re Regional Representation</p> <p>Added Expert Advisory Group in the use of the SNAP Regime to treat paracetamol toxicity in Children</p> <p>Branding update</p> <p>Elderly and frailty SIG renamed Older People in EM</p> <p>Antibullying Task &amp; Finish Group removed as project has delivered, TOR for new working group being established to drive forward the Respected campaign.</p> <p>Edit to Conference Committee Membership to reflect EDI and EMSAS co-options</p> <p>QEC and Service Delivery Cluster merged to create The Quality Cluster</p> <p>Invited Service Review Committee moved under Quality Cluster</p> <p>ESIG and Green ED moved under Quality Cluster as subcommittees of Service Design &amp; Delivery Committee</p> <p>Women In Emergency Medicine Committee moved into Membership Cluster and renamed Gender Equity Committee</p> <p>Addition of Guidelines for Provision of Emergency Medicine Services GPEMS Project Steering Group placeholder as TOR under development</p> <p>Addition of Consultants Committee placeholder into Membership Cluster</p> <p>Change to NomCom quorum, reducing from five to four and adding in two additional Committee members drawn from the College Membership.</p> <p>Emergency Medicine Foundation Programme removed as now simply a faculty delivering a programme.</p> <p>EM Leaders Project Board Terms of Reference removed as the project has delivered. Now this is a business-as-usual service a new Terms of Reference for EM Leaders is under development.</p>	
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		<p>New RespectED &amp; Incivility Task &amp; Finish Group as subgroup of SWPC</p> <p>Updating of EDI Committee remit</p> <p>EM Leaders Project Groups removed</p> <p>Added Sustainable Working Practices Committee: Short Life Working Party looking at the older emergency clinician.</p> <p>Redesign of Academic Cluster &amp; International Cluster</p>	
3.1		<p>Change of RemCo reporting lines – to be directly to the Board</p> <p>Abolition of the Expert Advisory Group in the use of the SNAP Regime to treat paracetamol toxicity in Children as its work has completed.</p> <p>Creation of the</p> <ul style="list-style-type: none"> <li>i. Property &amp; Income Strategy Working Group</li> <li>ii. Emergency Preparedness, Resilience and Response Professional Advisory Group</li> </ul>	GM
3.2	Autumn 2023		GM
4.0	December 2023	Emergency Medicine Physicians Associates Forum was disbanded by the Board in September 23 as it had not met for over 18 months. It was replaced by a new Emergency Medicine Physicians Associates Working Group.	GM
5.0	March 2024	<p>Change of name and amended TOR for Service Design &amp; Delivery Committee which becomes Clinical Leadership &amp; Service Design Committee.</p> <p>RespectED Working Group, RCEM Fundraising Advisory Board and Short Life Working Party looking at the Older Emergency Clinician - now disbanded and lapsed.</p>	GM
6.0	June 2024	<p>Minor adjustment to Honours Committee TOR</p> <p>Creation of AI Task &amp; Finish Group</p> <p>Merger of Careers &amp; Recruitment Committees</p>	GM
7.0	December 2024	<p>Transfer of Sustainable Working Practices Committee into Quality in Emergency Care Cluster from Membership Cluster</p> <p>Executive Committee: Change to meeting periodicity to allow more flexibility, extending the remit to</p>	GM

		<p>implement the Governance Review recommendation of managing the Committee Clusters and Committees within in.</p> <p>Academic Committee: update to delegated powers to enable rule making regarding examinations (restoring a power removed accidentally earlier).</p> <p>RemCo: adding clarity about the election of a Chair for this Committee</p> <p>Audit &amp; Risk Committee formed, replacing Corporate Governance Committee</p> <p>Improving the Culture of EM Working Group created</p> <p>NomCom changes to make up of the Committee including the creation of a Vice Chair role and quorum</p> <p>Adding risk assessment duty to the standing rules for all Committees.</p> <p>Abolishing ISR and Informatics Committees as no longer required</p> <p>Adding the requirement that College Chairs and Committee Members must be in good standing with the College.</p> <p>Adding provision for a representative from Intensive Care Medicine to join TSC</p> <p>GPEMS Working Group expired. This is intended to be replaced by a new Working Group to manage GPEMS subject to Council approval in due course.</p> <p>EMSAS minor change to allow for temporary appointment of a Chair in the event of an issue with the Chair, as approved by Council Nov 2024.</p> <p>ACP Forum revision as approved by Council Nov 2024.</p>	
8.0	February 2025	<p>Chief Examiner added as a member of Council as approved by Council September 2024</p> <p>EMSAS Terms of Reference minor change to allow them to appoint Co-Vice Chairs and if they wish to in future, Co-Chairs.</p>	HB
9.0	March 2025	Global Emergency Medicine Committee EMSAS Rep to Committee Membership.	HB

		<p>Academic Committee Staff position updates, Committee remit updates; Recruitment and Careers Committee</p> <p>Portfolio Pathway Committee Update to CESR naming in document, promotion of CESR, work force implications and committee membership.</p> <p>GreenED Working Group name change to GreenED Subcommittee</p> <p>QEC change to allow for Co Chairs</p> <p>Inclusion of GPEMS Working Group</p> <p>Amendments to EMTA ToR</p>	
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## Contents

Amendment log .....	2
ABOUT THIS DOCUMENT .....	9
GENERAL TERMS OF REFERENCE .....	10
General Terms of Reference Conditions Precedent .....	10
BOARD OF TRUSTEES .....	16
Nominations & Appointments Committee .....	19
Property & Income Strategy Working Group .....	22
Remuneration Sub-Committee .....	23
COUNCIL .....	24
EXECUTIVE COMMITTEE .....	26
National Boards for Scotland, Wales, and Northern Ireland .....	28
Regional Boards .....	29
Audit & Risk Committee .....	30
AI Task & Finish Group .....	33
Guidelines for Provision of Emergency Medicine Services (GPEMS) Working Group .....	35
ORGANISATIONAL DEVELOPMENT CLUSTER: .....	36
Culture of EM Working Group Remit and objectives .....	36
Equity Diversity & Inclusivity Committee .....	38
Honours Committee .....	39
ACADEMIC CLUSTER .....	40
Academic Committee .....	40
Exams Committee .....	43
Educational Resource Committee .....	45
eLearning Committee .....	46
Ultrasound Committee .....	47
Emergency Medicine Physicians Associates Short Life Working Group .....	49
Recruitment & Careers Committee .....	50
Research Committee .....	52
Training Standards Committee .....	55
Advanced Clinical Practitioners Credentialling Committee .....	58
Curriculum Sub-Committee .....	60
Portfolio Pathway Committee .....	62
Reports to .....	62
Aim .....	62
Responsibilities .....	62
Meetings .....	63
Global Emergency Medicine Committee .....	64
MEMBERSHIP & PROFESSIONAL MATTERS CLUSTER .....	67

Emergency Medicine Advanced Clinical Practitioners' Forum (ACP Forum) .....	67
Emergency Medicine Trainees' Association (EMTA).....	69
Forum for EM Specialty And Specialist Doctors (EMSAS) .....	79
Gender Equity Committee .....	81
LAY ADVISORY GROUP.....	82
QUALITY CLUSTER .....	83
Clinical Leadership & Service Design Committee .....	83
Emergency Preparedness, Resilience and Response (EPRR) PAG.....	85
Environmental Special Interest Group.....	86
Environmental Special Interest Group: GreenED Subcommittee .....	87
Same Day Emergency Care Special Interest Group.....	88
Quality In Emergency Care Committee .....	89
Best Practice Sub-Committee .....	90
Older People in Emergency Medicine SIG .....	91
Public Health EM SIG .....	91
Toxicology SIG .....	91
Mental Health Sub Committee .....	92
Paediatric Emergency Medicine Professional Advisory Group.....	92
Pre-Hospital Emergency Medicine Professional Advisory Group.....	94
Quality Assurance & Improvement Sub-Committee .....	96
Safer Care Sub-Committee.....	97
Sustainable Working Practices Committee .....	98



## ABOUT THIS DOCUMENT

This document contains the Terms of Reference (ToR) for the various Committees of the Royal College of Emergency Medicine.

Under our Ordinances<sup>1</sup> the Board of Trustees may:

“Establish such boards, standing and ad hoc committees or sub-committees for the purpose of dealing with any subject as it may from time to time determine.

The Board of Trustees shall have power to determine by Byelaws the constitution and procedures of such boards, committees or sub-committees.

The Board of Trustees may by resolution delegate all or any of its functions, powers, duties and discretions to any body, board, committee, sub-committee, Officer or individual upon terms and subject to such conditions as the Board may from time to time, by resolution, determine.”

Over time a range of Committees has been established, and each has had an individual terms of reference document created for it. Given that a number of these have similar content for good governance purposes and ease of reference this document draws all of them together into one place.

In future any new Committees or amendments to the content of this document shall usually be considered by the Corporate Governance Committee who will, if appropriate recommend that the Board approves the revised document.

This document shall be maintained by an employee of the Royal College as nominated by the Chief Executive.

Gordon Miles  
Chief Executive  
21 December 2024

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<sup>1</sup> The Royal College of Emergency Medicine Ordinances Paragraph 8

# GENERAL TERMS OF REFERENCE

## General Terms of Reference Conditions Precedent

1. Each Committee, Sub-Committee and Working Party shall have a Terms of Reference.
2. A Committee is a body of one or more persons that is subordinate to Council or the Board of Trustees. Usually, the Council or Board of Trustees sends matters into a committee to explore them more fully than would be possible if the Council/Board itself were considering them.
3. A Sub-committee is a committee that reports to another Committee.
4. A Working Party/Group is a committee that is established for a limited time to develop and/or review areas of policy, procedure and practice and put forward suggestions for the Council to consider.
5. A Special Interest Group (SIG) or Professional Advisory Group (PAG) is a small community with a shared interest in advancing a specific area of knowledge, learning or technology where members cooperate to affect or to produce solutions within their field, and may communicate, meet, and organise conferences or study days. All SIG/PAGs shall be formed under the auspices of a Committee, with responsibility for that PAG/SIG falling under the chair of the relevant Committee.
6. References to a 'Cluster' reflects the structuring of Committees into groups or clusters of Committees under a role holder or role holders led by a Cluster Responsible Officer who will be either a Vice President or other College Role Holder or the CEO or nominated deputy.
7. All College Committees and Working Parties shall have Terms of Reference conforming to our governing documents. Normally requests for new Committees or Working Groups/Parties are considered by the Executive Committee, scrutinised by Corporate Governance Committee and a recommendation is made to Council or the Board of Trustees accordingly.
8. All Committees and Working Parties shall have a clear reporting structure, ultimately leading to Council or directly to the Trustee Board. They shall report their activity at least annually. The Composition of a Committee is determined as set out in each Terms of Reference.
9. In the remainder of this section, the term Committee shall relate to all Committees, Sub-Committees, SIGs, PAGs and Working Parties/Groups unless otherwise stated.
10. Any Committee has the power to co-opt additional Members to make up the required number of Committee Members that are described in that Committee's Terms of Reference.
11. For ease of reference and to avoid duplication the following shall apply to every Committee, unless otherwise stated in the specific Terms of Reference for an individual Committee.

### Governing Documents

12. In relation to the terms of reference, the Governing Documents are the Charter, Ordinances, Bye Laws, Regulations and the Scheme of Delegation.

### Delegated Powers:

13. No Committee has delegated powers to make decisions on behalf of the College unless expressly stated in the Terms of Reference for that Committee. The Scheme of Delegation sets out the powers the Trustee Board delegates to Council in relation to Committees and to role holders.
14. Committees shall prepare for Council or Trustee Board scrutiny annual Work Programmes detailing their planned activity.
15. A budget (if required) shall be agreed through the College Treasurer under the standing financial procedures. The Chair of a Committee has budget responsibility for the activities of that Committee in accordance with the standing Financial Procedures of the Royal College. The Committee Secretary shall act as deputy budget holder.

## **Committee Chair/Member appointment**

16. Committee members and Chairs of Committees must be in good standing with the College.
17. The process for appointing chairs and members of committee

## **APPOINTING A CHAIR**

18. Unless otherwise stated in the Charter, Ordinances, Bye Laws or Terms Of Reference for an individual Committee, Members and Chairs of Committees are appointed by a selection process involving open advertising.
19. The following applies to these Committees:
  - Academic Committee
  - AI Task & Finish Group
  - Clinical Leadership & Service Design Committee
  - EDI Committee
  - Educational Resources Committee
  - Gender Equity Committee
  - Global Emergency Medicine Committee
  - Informatics Committee
  - Invited Services Review Committee
  - Quality in Emergency Care Committee
  - Research Committee
  - Sustainable Working Practices Committee
20. Other Committees may wish to seek advice from the Nominations and Appointments Committee (NomCom) for help in recruiting and selecting their Chairs.
21. The Committee Secretary is responsible for ensuring that there is an appointed Chair in place, and the Chair and Committee Secretary together are responsible for ensuring that there are sufficient committee members, with suitable skills, to form the Committee.
22. When the Committee Secretary becomes aware that the term of the Chair is coming to an end (either because the Chair will have served the time appointed for, or because they are stepping down) the Committee Secretary will meet with the Chair of NomCom. (NomComChair@rcem.ac.uk)
23. The Secretary and the NomCom Chair together will propose the members of the Appointments Panel. The final decision on membership of the panel is with the NomCom and the NomCom Chair will be responsible for getting a decision from NomCom. The decision will also include who will Chair the Appointments Panel. It is considered bad practice for the retiring Chair of a committee to be on the Appointments Panel for a successor. However, the Chair may speak to candidates and ideally this would be offered to candidates who make it through to the shortlist.
24. The Secretary and the Chair of the Appointments Panel will produce a timetable to cover the following actions:
  - a. The creation of a job specification including role description and person specification.
  - b. A communications plan to ensure that the role is advertised widely and a job pack which includes at least the job specification, but could also include more information on the background to the committee
  - c. An agreement on who will administer the process (receive applications, communicate with candidates during the process etc) – this is usually the Committee Secretary

- d. The process for making an application (usually a CV and a two-page letter addressing the points on the person specification)
- e. A date by which all applications must be received
- f. A date for the Appointments Panel to receive applications and a process for drawing up a short list. (This is usually a scoring against items on the person specification which should have been addressed in the two-page letter)
- g. A date for a short-listing meeting. The Panel may do their scoring and preparation beforehand, but they should meet to decide on the candidates.
- h. A date or dates for interviews (these should be included in the Information Pack that goes out with the initial job pack). Except in the most exceptional circumstances panel members must attend all the interviews.
- i. The creation of questions and the agreement of panel members to the questions
- j. The date for the panel to convene to make a decision unless this is to be immediately after the last interview (which is preferable)
- k. The Committee Secretary will:
- l. Prepare a letter of appointment for the CEO to sign
  - i. Update the IMIS Committee Records
  - ii. Ask for a Conflicts of Interest declaration using this link: [http://account.rcem.ac.uk/RCEM/Webformz/Apply\\_WFZ\\_DeclarationofInterestsForm.aspx](http://account.rcem.ac.uk/RCEM/Webformz/Apply_WFZ_DeclarationofInterestsForm.aspx)
  - iii. Ask for the completion of confidential demographic information into the College database using this link: <https://bit.ly/RCEM-CountMeIn>
  - iv. Arrange for induction and advise the Council of the appointment.
- m. Once the role is accepted feedback may be offered to applicants who if they wish to receive it should be asked to schedule a call with the NomCom Chair.

## **APPOINTING A COMMITTEE MEMBER**

- 25. The Chair of the Committee is responsible for the process.
- 26. The Chair and the NomCom Chair (NomComChair@rcem.ac.uk) together will propose the members of the Appointments Panel. It would be usual for the Chair of the Committee to Chair the Appointments Panel. The Chair may wish to seek advice from the NomCom Chair on the process and the development of the role profile and person specification for the role.
- 27. The Chair of the Appointments Panel will produce a timetable to cover the following actions:
  - a. The creation of a job specification including role description and person specification.
  - b. A communications plan to ensure that the role is advertised widely and a job pack which includes at least the job specification, but could also include more information on the background to the committee
  - c. An agreement on who will administer the process (receive applications, communicate with candidates during the process etc) – this is usually the Committee Secretary
  - d. The process for making an application (usually a CV and a two-page letter addressing the points on the person specification)
  - e. A date by which all applications must be received
  - f. A date for the Appointments Panel to receive applications and a process for drawing up a short list. (This is usually a scoring against items on the person specification which should have been addressed in the two-page letter)
  - g. A date for a short-listing meeting. The Panel may do their scoring and preparation beforehand, but they should meet to decide on the candidates.

- h. A date or dates for interviews (these should be included in the Information Pack that goes out with the initial job pack). Except in the most exceptional circumstances panel members must attend all the interviews.
  - i. The creation of questions and the agreement of panel members to the questions
  - j. The date for the panel to convene to make a decision unless this is to be immediately after the last interview (which is preferable)
  - k. The Committee Secretary will:
    - l. Prepare a letter of appointment for the CEO to sign
      - i. Update the IMIS Committee Records
      - ii. Ask for a Conflicts of Interest declaration using this link: [http://account.rcem.ac.uk/RCEM/Webformz/Apply\\_WFZ\\_DeclarationofInterestsForm.aspx](http://account.rcem.ac.uk/RCEM/Webformz/Apply_WFZ_DeclarationofInterestsForm.aspx)
      - iii. Ask for the completion of confidential demographic information into the College database using this link: <https://bit.ly/RCEM-CountMeIn>
      - iv. Arrange for induction and advise the Council of the appointment.
  - m. Once the role is accepted feedback may be offered to applicants who if they wish to receive it should be asked to schedule a call with the Committee Chair.
28. If advertising for members or Chairs proves unsuccessful the Committee may co-opt members into these positions subject to approval by the Executive Committee as stated in the bye laws.
29. For new Committees, the terms of reference will then be developed through the Committee and in the case of Committees reporting to Council come to Council for approval, and the Board for ratification. For Committees reporting to the Board the Board will decide the terms of reference.
30. For Committees in existence at the point where these Terms of Reference are approved, the existing Committee Members and Chairs may continue for the remainder of their existing term of office.

### **Committee Secretary**

- 31. A Committee Secretary will normally be an employee of the College who is assigned the role by the Chief Executive. Where there is no staff member available for this role then the Committee may appoint one of its number to be secretary for the meeting in question or approach the Chief Executive to seek out-sourced Committee support for minute taking or other administrative help (subject to budget availability).
- 32. The Committee Secretary will arrange meetings, take minutes, act as deputy budget holder and working with the Committee Chair prepare Agendas, collate and distribute papers and advise on any governance arrangements including recruitment.
- 33. Committee secretaries shall produce draft minutes of their meetings within 14 days of each meeting and these will be circulated to all members, including ex-officio members, whether they attended the meeting or not. The draft minutes will then be brought to the next meeting for approval and/or amendment.
- 34. The Committee Secretary is a non-voting role at the Committee.

### **Terms of Office**

- 35. Terms of Office are for three years.
- 36. Suggested succession planning for committee Chairs is that appointment occurs 6-12 months prior to the expected handover date, with the chair elect acting as a deputy. As a chair steps down, it may be reasonable, at the discretion of the new chair, for them to act as a deputy for a further 6-12 months to facilitate continuity. This does not preclude formal appointment of another deputy should that be deemed required as part of the Terms of Reference.
- 37. Where a new committee is formed consideration should be given to one of the College Executive Committee acting as a co-chair, should this be deemed beneficial.
- 38. Committee Members may serve up to two consecutive terms on a particular Committee, after which they shall step down unless as otherwise approved by Council, or in the case of the Corporate Governance or

Executive Committee by the Trustee Board. Having stepped down for one term of office they may reapply after that. If during a term of office, a Committee Member becomes a Chair then the following paragraph applies and the rules under this paragraph are disregarded.

39. Subject to the Bye Laws, Chairs of Committees shall normally serve for an initial term of office following their appointment, after which they may offer themselves for re-appointment in competition with others. If re-appointed, they may serve for a further term, after which they will not be eligible to stand for the post in question but may sit on the Committee as a member for a further term subject to Council approval.
40. RCEM Role Holders are appointed to Committees for their term of office and on a change of office holder the position rotates with the office not the individual.

### **Committee composition**

41. The composition of a Committee is determined by Council or the Board of Trustees, as set out in each Terms of Reference. Unless otherwise stated in the Terms of Reference the number of Committee Members shall not exceed 12 persons including the Chairperson.
42. In the absence of the Chair, a Deputy, either by appointment by the Chair or nominated from amongst the Committee Members present shall act as Chair for that meeting and may vote at that meeting.
43. Individuals standing on Committees have a personal responsibility to be present (either in person or through appropriate media) for two thirds of all meetings. Such individuals are expected to take on a stream of work such as preparing documents, gathering information, attend meetings, providing Royal College approved advice to individuals or organisations and to complete activities in a timely fashion. Council or the Trustee Board may remove Committee Members who fail to meet these requirements.
44. The following role holders may attend any Committee meeting of the College as an ex-officio member: President, Trustees, Vice Presidents, Dean, Treasurer and Chief Executive (or nominated deputy) and by agreement with the Chief Executive the Directors of Corporate Services, Education and Engagement & External Affairs.
45. Consideration should be given, upon formation of a new committee, as to whether specific representation from EMTA, EMSAS, ACP Forum or from EDI/GEC is required. This should be balanced against the practicalities of fielding such representatives in multiple forums and of narrowing opportunities for participation amongst the wider membership.

### **Quorum**

46. Unless otherwise stated in the terms of reference or elsewhere in the governing documents: a) the quorum shall include the Chair or nominated Deputy and those present in person and those using an electronic communication method to join the meeting; and b) for a Committee the quorum shall be at least half the number of Committee Members of that Committee, whether they are present or not.

### **Conducting business**

47. To conduct business and make decisions Committee members will either be present in person or using electronic conferencing facilities, or where this is not practical decisions may be made by email or other electronic media.
48. Decisions will normally be made by agreement but where a vote is necessary this will be indicated by a show of hands or a suitable electronic equivalent. In the event of a tie the Chair has a deciding vote. In the absence of the Chair, a Deputy nominated either by the Chair or from amongst the Committee Members shall act as Chair for that meeting and may vote at that meeting.
49. Individuals standing on Committees have a personal responsibility to take on a stream of work such as preparing documents, gathering information, providing Royal College approved advice to individuals or organisations and to complete activities in a timely fashion.

### **Risk Management**

50. All Committees and Working Groups shall advise the CEO and Chair of Audit & Risk Committee of their assessment of the risks that they are running for the College including details of what action is being taken to mitigate the risks. This to enable the Audit & Risk Committee to add relevant items to the College Risk Register.

## BOARD OF TRUSTEES

1 The Trustee board of the College takes its authority and its responsibilities from two sources:

a. Under the Charities Act 1993 the trustees of a charity are “the people responsible under the charity’s governing document for controlling the management and administration of the charity, regardless of what they are called”. Charity law lays a number of specific duties on all charity trustees, which are reflected in these terms of reference. In essence these are:

- A duty of compliance with the charity’s objects, its governing documents and all relevant legislation and regulation.
- A duty of care, to ensure that the charity is well run and efficient and that professional advice is sought in order to manage risk.
- A duty of prudence in respect of managing the charity’s assets.

b. The Royal Charter, Ordinances, Bye Laws, Regulations and Terms of Reference (its constitution) which set out who may become a trustee of the charity, how trustees are appointed and their powers.

1.2 The overall responsibility of the Trustee Board is:

To provide direction and stewardship for the College for the benefit of stakeholders as set out in the College’s objects described in our Royal Charter, by:

- a. Setting the vision, mission, values and strategic direction of the charity.
- b. Monitoring and communicating performance against the strategy, its impact upon stakeholders and its corporate behaviour.
- c. Acting as the guardians of the charity’s assets, both tangible and intangible, taking all due care over their security, deployment and proper application.
- d. Ensuring that the charity complies with all constitutional, legal and regulatory requirements.
- e. Ensuring that the charity’s governance is of the highest possible standard.

### 2. Main duties Strategic direction

2.1 The Trustees work in partnership with the Chief Executive and other senior staff to ensure that:

- a. The constitution and rules that govern the charity, remain fit for purpose (reviewed at least every three years).
- b. There is regular review of the need for the charity and for the services it provides or could provide, and regular review of strategic plans and priorities.
- c. The charity has a clear vision, mission, set of values and strategy, and that there is a common understanding of these by trustees, staff and volunteers.
- d. Annual and operational plans and budgets, and the fundraising strategy support the vision, mission and strategy.
- e. The views of stakeholders are regularly sought and considered in developing strategy and delivering services.
- f. There is regular review of the external environment for changes that might affect the charity (environmental, political, financial, competitive, partnerships, alliances).

### Performance management

2.2 The Trustees are responsible for the performance of the charity, for its impact upon beneficiaries and other stakeholders, and for its corporate behaviour by:

- a. Agreeing the mechanisms for measuring the charity’s impact and progress towards its vision, mission and strategic objectives, business plans and annual budgets, and regularly considering reports on the charity’s performance.
- b. Ensuring that there are policies and position statements to direct key areas of the charity’s business.



- c. Ensuring that there are quality and service standards for major areas of delivery and that these are met.
- d. Ensuring that the major risks to the charity are regularly identified and reviewed and that systems are in place to mitigate or minimise these risks.
- e. Ensuring that there are complaint systems in place, for users and supporters.
- f. Ensuring that there are processes for trustees, staff and volunteers to report activity which might compromise the effectiveness of the charity.
- g. Employing and holding the Chief Executive to account for the management and administration of the charity, with regular constructive feedback on his/ her performance.
- h. Ensuring that the charity has effective employment policies and processes in place, to recruit, train and develop staff and volunteers Finance and assets

### 2.3 The Trustees act as the guardians of the charity's finances and other assets by:

- a. Ensuring that the charity's financial obligations are met and that there are adequate financial controls in place to ensure all money due is received and properly applied, and that all assets and liabilities are recorded.
- b. Acting reasonably and prudently in all matters relating to the charity and always in the interests of the charity.
- c. Ensuring that there is an effective fundraising strategy in place. d. Being accountable for the solvency of the charity.
- e. Reviewing the condition and use of the properties and land owned by the charity.
- f. Ensuring that intangible assets such as organisational knowledge and expertise, intellectual property, the charity's brand, good name and reputation are recognized, used and safeguarded.

### 2.4 The Trustees must:

- a. Ensure, with professional advice as appropriate, that the charity complies with all constitutional, legal, regulatory and statutory requirements.
- b. Ensure the charity complies with health and safety standards as regards its staff, volunteers and when putting on events.
- c. Understand and comply with the constitution and regulations that govern the charity.

## 3. Governance

### 3.1 The Trustees aim for the highest possible standard of governance by ensuring that:

- a. The charity has a governance framework that is appropriate to a charity of its size/ complexity, stage of development, and its charitable objects, and reflects the diversity of its stakeholders. That this framework is regularly reviewed, along with the Board's performance.
- b. In consultation with the Chief Executive, the Board has the mix of skills and experience it requires to govern the charity well, and that the Board has access to, and considers, relevant external professional advice and expertise.
- c. Major decisions and policies are made by the trustees acting collectively, and that Board decisions are recorded in writing by means of minutes.
- d. The Board's delegated authority is recorded by terms of reference for board committees, job descriptions for honorary officers, trustees and key staff, and that reporting procedures back to the Board are recorded in writing and complied with.
- e. The responsibilities delegated to the Chief Executive are clearly expressed and understood, and directions given to him/ her come from the Board as a whole.
- f. There is a systematic, open and fair procedure for recruitment of trustees and of the Chief Executive.

- g. All members of the Board receive appropriate induction on their appointment and that they continue to receive appropriate advice, information and training (both individual and collective).
- h. Trustees have the College code of conduct and comply with it, and that there are mechanisms for the removal of trustees who do not abide by the code of conduct.
- i. In carrying out the above duties, professional advice is taken when necessary, and the advice received is recorded.

#### 4. Meetings

- 4.1 The Trustee Board will meet usually 4 times (and a minimum of 3) in any calendar year. In addition, there will be one strategy review day each year.
- 4.2 The Chief Executive, Directors of Education, Engagement & External Affairs and Corporate Services and such other members of staff as the Chair may require shall be in attendance at meetings.
- 4.3 Any member of the Board unable to attend should inform the CEO prior to the meeting. If a Board member is unable to attend the possibility of attending remotely will be explored.
- 4.4 If the Chair is absent from the meeting, the Dean or Vice President Membership will act as Chair for the proceedings. In the absence of both the Dean or Vice President Membership, a Trustee will be selected by those present to act as chair for the proceedings.
- 4.5 The agenda will be drawn up by the CEO in consultation with the Chair.
- 4.6 The CEO will provide minutes of Board meetings in consultation with the Chair.
- 4.7 The CEO or nominated deputy will be responsible for communicating the proceedings of the Trustee Board to staff, advisory bodies and other stakeholders as appropriate.

## Nominations & Appointments Committee

### 1. Constitution of the Committee

1.1. The Trustees resolved to appoint a Nomination And Appointments Committee (the “Committee”), which is a committee reporting directly to the Trustees.

1.2 The Committee will meet as often as business dictates subject to budget constraints.

### 2. Membership

2.1. Appointments to the Committee will be for a period of three years, which may be extended for one further three year period.

2.2. The Committee will comprise the following:

- a) A Chairperson and Vice Chairperson appointed as set out below;
- b) a College Role Holder;
- c) a Trustee of the College;
- d) a representative from the Equality Diversity & Inclusion Committee;
- e) a representative from Council..

2.3 The Chief Executive or in his absence his Deputy shall act as the Committee Secretary but shall not vote.

2.4. The Chair of the Committee shall be appointed by a process of open advertisement of the opportunity inviting applications, which shall then be decided by interview by a panel convened by the Trustees for the purpose.

### 3. Duties and Authority

3.1. The responsibilities of the Committee shall be to:

3.1.1. Prepare for the Trustees approval a recruitment plan setting out how it will appoint to vacancies that are to be filled.

3.1.2 Appoint the eight members of the Trustee Board, which are four lay members and four members of the College. To do this it will set and regularly review the criteria for identifying and nominating candidates based on the description of the role and capabilities required for individual appointments. In the event that the Trustees decide to appoint a Chair of Trustees then the appointment will be made by this Committee after a process of open application and interview.

3.1.3 Periodically review the structure, size and composition (including the skills, knowledge, background and experience) required of the Trustee Board compared to its current position, and make recommendations to the Board with regard to any changes.

3.1.4. Be responsible for identifying and nominating for approval of the Trustees, candidates to fill vacancies as and when they arise. In identifying suitable candidates the Committee shall

- advertise the vacancy widely and subject to budget may seek the services of an appropriate agency to assist in the search;
- consider candidates from a wide range of backgrounds;
- consider candidates on merit and against objective criteria and with due regard for the benefits of diversity on the Board or Committee it is recruiting for, including gender, taking care that appointees have enough time available to devote to the position.

- before appointment is made, evaluate the balance of skills, knowledge and experience on the Board or Committee and, in light of this evaluation, prepare a description of the role and capabilities required for a particular appointment.
- keep up to date and fully informed about strategic issues and commercial changes affecting the College and the sector in which it operates.
- ensure that on appointment, a formal letter of appointment is issued setting out clearly what is expected of them in terms of time commitment, service and involvement outside Board meetings.

3.1.7 The Committee may be asked by the Trustees to recommend a shortlist of suitable candidates selected against objective criteria for other College Committees/positions using the processes set out in this terms of reference or otherwise as determined by the Trustees.

3.2. The Committee shall also make recommendations to the Trustee Board concerning:

3.2.1. Membership of the Corporate Governance Committee, in consultation with the Chair of that Committee.

3.2.2. The re-appointment of any Board member at the conclusion of their specified term of office, having given due consideration to their performance and ability to continue to contribute to the Board in light of the knowledge, skills and experience required.

3.3. The Committee is authorised to seek any information it requires from any employee of the College in order to perform its duties.

3.4. The Committee is authorised by the Trustees to obtain, at the College's expense, outside legal or other professional advice on any matters within its reference, subject to budget.

#### **4. Meetings and Quorum**

4.1. Only members of the Committee have the right to attend Committee meetings. However, the following may attend by invitation:

President

Vice President

Human Resources Manager

4.2. The Chief Executive, or his nominee, shall act as Secretary of the Committee, but shall not be a voting member of the Committee.

4.3. The Chair or Vice Chair and one other Member of the Committee shall constitute a quorum.

4.4. A duly convened meeting of the Committee at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Committee.

4.5. The Committee normally meets at times that the Chair of the Committee deems appropriate.

4.6. The Secretary of the Committee shall minute the proceedings and resolutions of meetings of the Committee including recording the names of those present and in attendance.

4.7. Minutes of the meeting will be circulated to all members of the Committee.

#### **5. Reporting responsibilities**

5.1. The Committee shall make whatever recommendations to the Board it deems appropriate on any area within its remit where action or improvement is needed.

5.2. The Committee shall make a statement in the annual report about its activities and the process used to make appointments and explain if external advice or open advertising has not been used.

## **6. Other matters**

6.1. The Committee shall, at least once a year, review its own performance, constitution and terms of reference to ensure its maximum effectiveness and recommend any changes it considers necessary to the Board for approval.

## Property & Income Strategy Working Group

A working party of the Board to examine the issues and consider solutions that could be brought into play in time to influence the budget setting cycle. The Working Group shall continue until 31 December 2025, when it will be reviewed.

### Scope:

In scope:

- property strategy (including but not limited to the potential sale of Breams Buildings, leaseback, sale on long lease, the suitability of Octavia House for our medium term needs)
- income generation issues and associated cost recovery (membership subs, events pricing, examinations pricing, QIP programme pricing and other income generation opportunities)

### Membership:

Working Group Chair: Vice President Treasurer

Members:

- Audit & Risk Committee Chair, Derek Prentice until 30 June 2025
- Audit & Risk Committee Member, Chris Pickering until 30 June 2025
- Trustee(s) appointed by the Board: Ian Ailles and Palvi Shah
- Gordon Miles, CEO
- Nigel Pinamang, Director of Corporate Services
- Any Trustees who have indicated their wish to attend

## Remuneration Sub-Committee

The Remuneration Committee is a Committee of the Board. It shall have the following terms of reference and shall meet when requested to do so by the Board:

### **Constitution**

The Terms of Reference for the Remuneration Committee outlined below are defined by the Board and may be amended by the Board at any time.

The Committee has an advisory role and reports to the Board.

The Committee remit covers decision making on the following:

- a. employee remuneration;
- b. President's remuneration;
- c. Remuneration for other roles undertaken by those from the membership;
- d. Chief Executive's remuneration
- e. The Royal College of Emergency Medicine Expenses Policy

### **Membership**

The Board is responsible for the appointment of members to the Remuneration Sub-Committee, for setting the term of members' appointments and for the revocation of any such appointments.

The Remuneration Committee shall comprise not less than three members. These shall be the Treasurer, the Vice President Membership and a member of the Lay Group. They shall elect a chair from amongst their number.

The quorum shall be two Committee members one of whom should be the Committee Chairperson unless he/she is unable to attend. All members of the Committee shall be advised of the business to be transacted at any meeting even if they are unable to be present.

No one other than members of the Committee is entitled to be present at Committee meetings except that the Chief Executive Officer, Director of Corporate Services and the Human Resources Manager shall normally be in attendance as a non-voting member except when issues regarding their own remuneration are discussed.

The Chair shall appoint one of the members to act as secretary to the Committee and shall produce such papers and minutes of the Committee's meetings as are appropriate, in a timely manner.

The Remuneration Committee is authorised by the Board to obtain professional advice subject to budget approval.

# COUNCIL

Remit of the Council

## Objectives

To work within the powers delegated to it by the Board of Trustees.

To ratify applications for membership of the Royal College;

To make decisions on behalf of the Royal College on matters relating to emergency medicine specialty business;

To oversee all work of the Committees of the Royal College that do not report directly to the Board of Trustees and delegate work as necessary in the fulfilment of the charitable objects subject to the powers set out in the Scheme of Delegation;

Delegate relevant powers to Committees and individuals as described in the Scheme of Delegation or the governing documents;

Create Regulations for the business of the Royal College.

## Quorum

The voting arrangements are as defined in the ordinances: The quorum is 12 voting members of Council of which at least 3 shall be Role Holders.

## Membership

The composition of the Council is described in the Ordinances. The Term of Office for Council Members is 3 years.

Role holders are appointed under the Ordinances and Bye Laws.

- President. The President shall be the Chair or, in his/her absence, the President Elect (or Immediate Past President) is to chair the meeting.
- President Elect (or Immediate Past President)
- Vice Presidents
- Vice President Membership
- Dean
- Treasurer

Other Council Members who are appointed as described below:

- Chair - Training Standards Committee (TSC) who is nominated by the TSC and appointed by Council
- Chair - Research Committee who is nominated by the R&P committee, appointed by Council
- Chair of the Quality In Emergency Care Committee, who is appointed by Council
- Director of CPD who is appointed by Council
- Chairs - Regional Boards in England who are elected subject to the Bye Laws by Fellows, Associate Fellows and Members (excluding Honorary Fellows, Associate Members and Affiliates)
- National Vice Presidents - National Boards of Scotland, Northern Ireland, Wales and the Republic of Ireland who are elected subject to the Bye Laws by Fellows, Associate Fellows and Members (excluding Honorary Fellows, Associate Members and Affiliates)
- Emergency Medicine Trainees Association (EMTA) Chair who is elected by the members in training



- Emergency Medicine Staff And Specialists (EMSAS) Chair who is elected by the members of the Royal College working as Staff or Specialty doctors
- Advanced Clinical Practitioners Forum Chair who is elected by Associate Members (Advanced Clinical Practitioners)
- Corporate Governance Committee Chair who is appointed under the terms of reference for that Committee
- Chair of the College Lay Group who is appointed by Council
- Representatives of other Royal Colleges by invitation of Council
- Representative of the Faculty of Emergency Nursing by invitation of Council
- Representative from the Faculty of Pre-hospital Emergency Medicine by invitation of Council
- Chief Examiner
- Chief Executive
- Directors
- The Council may co-opt other members as it sees fit to conduct its business.

### **Responsibilities**

Direct and monitor the work of the Committees and of Royal College specialty matters

Receive reports from committees of the Royal College and the President and Chief Executive

Determine emergency medicine policy for the Royal College

Respond to external developments and influences and provide Royal College position papers and advice for members

Ensure timely communication with members on developments within the Royal College

By resolution amend Regulations for the Royal College within the power of the Charter and Ordinances

Approve Council role holder and other Council Member appointments in accordance with the governing documents.

Approve nominations for membership and approve the removal of membership rights where appropriate

Make recommendations on the level of subscriptions for members

### **Meetings**

As defined in the Ordinances, meetings are held at least 4 times a year.

## EXECUTIVE COMMITTEE

Remit of the Executive Committee which reports to the Trustee Board

To develop emergency medicine health policy and strategy for discussion and approval by Council and the Board of Trustees.

To act in accordance with the policy, strategy and budget agreed by Board of Trustees and Council to ensure that the Board and Council decisions are enacted, including:

To support the CEO and Directors with the work of the Royal College including providing advice on issues

To manage the Cluster Structure of Committees and to ensure that all Committees have work programmes, are delivering against them and are following good governance in line with College rules. The Executive Committee may make recommendations to the Board to disestablish or form new Committees.

To provide the Council with relevant information to support strategic decision making in relation to specialty matters.

### Quorum & Business

The President shall be the Chair or, in his/her absence, the President Elect (or Immediate Past President) is to chair the meeting.

The quorum for the Executive Committee must have the minimum attending:

- President or President Elect or Past President
- At least 4 other Committee members one of whom must be a Vice President.

### Membership

Membership of this Committee comprises:

President – Chair

President Elect (or Immediate Past President)

Vice President – Membership

Dean

Treasurer

Vice Presidents (2)

Vice President – Wales

Vice President – Scotland

Vice President – Northern Ireland

Vice President - Policy

Chair of Research Committee

Chair, Quality in Emergency Care Committee

Chief Executive

Directors of Corporate Services, Education, Engagement & External Affairs

CEO's Executive Assistant (Ex-Officio Committee Secretary)

Any additional co-opted member as authorised by Council

Ex-officio members will be invited to relevant meetings but they will not have any voting rights.

**Powers delegated**

To action powers delegated by the Trustee Board

Assist the Chief Executive with the co-ordination and implementation of the work of the Royal College to implement Council decisions and policies.

Develop policy and strategy for discussion and approval by Council

Ensure that Council policy, Board strategy and decisions are implemented

Ensure swift response to communications from the membership

Enable effective responses to events, communications and consultations from other agencies.

Deal with media enquiries (through nominated members of the Executive)

Act on advice from the Corporate Governance committee in matters of governance

Receive regular reports on Royal College activities

Provide advice to Committee Chairs and Officers

Organise elections.

Provide information to the Council for strategic decisions to be taken

**Meetings**

Meetings are held usually between 4-6 times per year. Where possible they will be arranged to coincide with other Royal College committee meetings, such as those of other major committees, and if members are unable to attend they should be encouraged to join the meeting by teleconferencing.

# National Boards for Scotland, Wales, and Northern Ireland

## Remit and Objectives

The National Boards of Scotland, Wales and Northern Ireland will represent the College in their respective nations and support the work of the College by:

- Coordinating and collating information on local issues and dissemination of information from College to membership
- Liaising on behalf of the speciality with existing bodies and structures in their nations.
- The National Boards will have the authority to establish its own connections and representations with appropriate bodies.

## Membership

- The Vice President
- Vice Chair
- Chairs of Regional Training Committees or Schools of EM or other equivalent bodies
- A Fellow responsible for CPD
- A fellow leading on advice for revalidation
- Other Fellows locally elected or nominated according to arrangements proposed by the National Board and approved by Council.
- Trainee representative
- EMSAS representative

Other individuals may be asked to attend National Board meetings from time to time but they will not be core Board members.

## Meetings

Meetings may take place on a quarterly basis.

Optionally, the Board can choose to hold more meetings on a needs-be basis, or hold other events including, but not limited to, conferences or annual dinners subject to budget.

## Regional Boards

### Remit and Objectives

The Regional Boards will represent their localities and support the work of the College by:

- Creating a communication channel whereby Board members will update the Chair on any relevant information or experiences which can then be relayed back to RCEM national Council.
- Raising awareness of the pressures facing Emergency Departments and Emergency Medicine staff on a regional level.
- Providing a space where different learning and pathways can be shared to help members in their roles or to be disseminated back to Emergency Departments.
- Disseminating relevant updates from RCEM Council back to Board members, who will then cascade this information back into the region.
- Support the Regional Chair's local campaign efforts whether that is through media activity or through influencing policymakers and other key stakeholders.
- Hosting meetings or working on projects that bring attention to important regional issues and topics.
- Supporting the Regional Chair in their activities and duties.

### Membership

The Regional Boards will be composed of:

- Regional Chair
- Vice Chair
- Trainee representative
- EMSAS Representative
- ACP Trainee Representative
- SWPC Representative
- Lay Group Representative
- 1-2 representatives from each NHS Trust in the region

Other individuals may be asked to attend Board meetings from time to time but they will not be core Board members.

There is flexibility for other types of representatives on the Board depending on the interests of the region (for example, a PEM Representative).

### Meetings

Meetings may take place on a quarterly basis. These meetings can take place virtually or in-person. If members are unable to attend in-person, they should be encouraged to join the meeting via teleconferencing.

Optionally, Regional Chairs can choose to hold more meetings on a needs-be basis, or hold other events including, but not limited to, conferences or annual dinners subject to budget approval.

## **Audit & Risk Committee**

### **Remit**

There shall be an Audit & Risk Committee advisory to and reporting to the Board, whose remit shall be to:

- a) provide the Board with an independent assessment of the College's statutory financial position and accounting affairs, with the objective of providing further assurance of the quality and reliability of the financial information used by the board; and
- b) to review and oversee the establishment and maintenance of effective systems of risk management and internal control across the College's activities that support the achievement of the organisational objectives and strategic goals.

This includes the following:

### **Risk Management**

To review the scope and effectiveness of the systems for the identification, assessment, management, monitoring and control of financial and non-financial risk, including specifically those relating to internal financial control, financial reporting, internal control and risk management, and receive reports from the executive and the auditors on the effectiveness and integrity of those systems. This involves reviewing the Risk Register, obtaining assurance on risk management arrangements from internal auditors, and reviewing the status and trends of all risk in the strategic risk register.

To consider non-financial risks, insofar as they impact on the commercial or financial position of the College or its reputation.

To review the comprehensiveness, reliability and integrity of the assurances provided in relation to internal control and risk management, and review and recommend for signature the public statement to be made by the Board on the College's internal controls and risk management framework.

To review the College's procedures for detecting fraud, bribery and whistle blowing and ensure that arrangements are in place by which staff may, in confidence, raise concerns about possible improprieties in matters of financial reporting, financial control or such other matters.

### **Financial Reporting**

To review, and challenge where necessary, the actions and judgments of the executive, in relation to the College's statutory financial statements, together with the associated narrative reports, regulatory announcements, press releases, or any other document containing financial information proposed for issue by the College before submission to the Board

To monitor the timelines, integrity and reliability of the financial information

To discuss any issues arising from the interim review or full-year audit, and any other matters the auditors may wish to raise

To discuss as appropriate new accounting standards and other developments and report on the impact of these to the Board and to monitor systems in place to ensure compliance with accounting standards

To recommend to the Board the "going concern statement" with evidence to support

To monitor systems in place to ensure compliance with the Standing Financial Instructions

### **Audit**

To oversee the College's relations with the auditors and consider and make recommendations to the Board on their appointment, reappointment or removal. If new appointees are to be sought as auditors, the Committee shall oversee the selection process

To approve the terms of engagement and the fees to be paid to the auditors in respect of audit services and non-audit services and monitor the relationship between these

To assess annually the qualification, expertise and resources, independence, objectivity and effectiveness of the auditors and of the external audit process

To discuss with the auditors, before the audit commences, the nature and scope of the audit

To review the findings of their work with the auditors, including discussion of the management letter and any major issues that arose during the course of the audit

To review the audit representation letters before consideration by the Board

To supervise the programme of internal audit and the executive actions that follow

To ensure that the provision of internal audit and non-audit services by the auditors does not impair their independence or objectivity

To investigate the issues giving rise to any resignation of the auditors and consider whether any action is required

### **Compliance & Internal Audit**

Review the delegated authorities annually, report to the Trustees on whether they are adequate and make any recommendations to the Trustees.

Monitor the integrity of the system of internal controls. In particular, to review management's and the internal auditors' reports on the effectiveness of the system of internal control, including Health and Safety and compliance with employment and Charity law.

### **Whistleblowing**

Review the RCEM's arrangements for employees, Trustees, Members and third parties to raise concerns about possible wrongdoing in financial reporting or other matters and ensure that they allow proportionate and independent investigation.

### **Membership**

The Committee shall comprise of the following members:

- Chair, who shall be a lay Trustee with either accountancy, and/or audit and risk experience.
- Vice President Treasurer
- Two externally recruited and appointed lay members to bring audit and risk management experience
- A fellow and a member of the College, recruited through open advertisement and a selection process.

The CEO and Directors of the College may attend this Committee, at the CEOs discretion.

### **Transitional arrangements**

As this Committee is created from a change in scope and membership of the Governance Committee there shall be the following transitional arrangements to ensure continuity of effective scrutiny:

The Chair of the Governance Committee shall be the first chair of the Audit & Risk Committee and be in post until 30 June 2025.

The following members of the Governance Committee shall transfer to the Audit and Risk Committee:

Jasmin Booth, independent lay member with IT experience and Joan Yu independent lay member with legal services experience, together with Mathew Hunt, Member and Chris Pickering Fellow to continue through to 30

June 2025 and then we will seek to advertise for these roles and fill the vacancies through a selection process with the assistance of the Nominations and Appointments Committee Chair.

James Gagg, Vice President Treasurer and Trustee for the remainder of his term of office, noting that that the Vice President Treasurer role a permanent member of this Committee.

**Quorum**

The quorum shall be three members one of whom shall be the Chair.



## AI Task & Finish Group

### Objective and Remit:

The objective of the Task and Finish Group is to provide a strategic recommendations for RCEM and emergency medicine to engage safely and effectively with artificial intelligence (AI), with the aim of RCEM being the 'go to' expert national body for matters relating to emergency medicine and AI.

### Scope:

The scope of the Task and Finish Group in relation to the practice of emergency medicine within emergency departments includes, but is not limited to, the following areas:

- Assess the current landscape of AI adoption by evaluating current and emerging AI technologies relevant to emergency medicine practice and education.
- Identify opportunities for leveraging AI to enhance clinical decision-making, patient care, and outcomes.
- Advise on the ethical, legal, and regulatory implications of AI use, including patient privacy, data security, and liability.
- Developing guidelines, policies, and recommendations and educational resources to guide the ethical and responsible implementation of AI technologies.
- Develop strategies for the integration of AI into clinical and educational settings, including potential pilot projects.
- Engage with stakeholders, including patients, healthcare professionals, AI developers, and regulatory bodies and medical royal colleges to gather diverse perspectives and provide expert advice.

### Membership

The Task and Finish Group shall consist of representatives from diverse stakeholder groups, including:

- VP appointed by the President.
- Chair
- RCEM QECC rep
- RCEM SDDC rep
- RCEM Informatics rep
- RCEM EDI rep
- RCEM Research rep
- RCEM Training rep
- RCEM Academic/Education rep
- RCEM Corporate Governance Committee rep
- Lay Committee Member
- EMTA rep
- EMSAS rep
- ACP Forum rep
- Membership will also include up to 4 appointed members
- Co-opted as required Clinicians practising within relevant specialties e.g. radiology.
- Co-opted as required Clinical Experts: Representatives from various medical specialties.
- Co-opted as required Researchers with expertise in AI and healthcare.
- Co-opted as required Legal and regulatory experts.
- Co-opted as required Patient representatives.
- Co-opted as required Industry partners with relevant technological expertise.

The following may attend meetings but not vote: Chief Executive and/or representatives from RCEM leadership team.

### Duration

The Task and Finish Group shall operate for a defined period of 2 years with the option for extension as deemed necessary by Council.

## **Reporting**

The Task and Finish Group will report its findings and recommendations to Council. Interim reports will be provided as necessary, with a final comprehensive report submitted within 12 months of the group's inception. The Chair will act as the primary liaison between the group and Council.

## **Meetings**

Meetings of the Task and Finish Group shall be held regularly (at least quarterly), with the frequency determined by the Chair based on the group's workplan and objectives. Meetings may be conducted in person or virtually, as appropriate.

Meeting agendas and relevant documents shall be circulated at least one week prior to each meeting.

## **Quorum**

A quorum will be constituted when at least 50% of the group's members, including the Chair is present. Decisions will be made by a majority vote, with the Chair having the casting vote in the event of a tie.

## **Dissolution**

The Task and Finish Group will be dissolved upon completion of its objectives or will be reviewed by Council within 2 years of inception. Outstanding matters or recommendations will be transferred to the Council for further consideration and implementation.

# **Guidelines for Provision of Emergency Medicine Services (GPEMS) Working Group**

## **Reporting:**

This working group will report to Council via Executive Committee.

## **Remit**

Subject to Council approval, to ensure that the design, development and maintenance of the guideline document for the Emergency Medicine Service is kept up to date.

The scope of this Guidance aimed at minimising heterogeneity between Emergency

Departments. GPEMS will be the definitive reference source for planning and delivery of UK Type-1 Emergency Medicine Services.

It is expected that the document will assist healthcare managers with service design and delivery and give senior EM clinicians clarity about their roles and responsibilities.

## **Membership**

The first Chair of the Working Group shall be the Past President. Thereafter, the role will be advertised in the usual way.

- The Working Group will additionally comprise:
  - Vice-Presidents x2 as appointed by the President
- Quality in Emergency Care Committee representative
- Lay Group representative
- Service Design & Delivery Committee representative
- Committee Member (maximum of three) by appointed by open application
- EMTA, EMSAS and ACP Forum representatives.

The CEO will make arrangements for a Committee Secretary to be appointed from amongst the employees.

## **Meeting Frequency**

The working group shall meet online as often as business dictates.

# ORGANISATIONAL DEVELOPMENT CLUSTER:

## Culture of EM Working Group

### Remit and objectives

The Culture of Emergency Medicine Working Group reporting to the EDI Committee is established subject to a review in 2026. It is a Working Group reporting to the EDI Committee and hence to Council.

The Working Group's primary role is to develop for Council's approval proposals to improve the workplace culture of emergency medicine recognising the years of feedback on bullying, harassment and other forms of incivility. This includes developing a campaign, which is expected to include the following:

- A review of RCEM material on tackling inappropriate behaviour and pulling this all together into one place as a resource for members.
- Ensuring our Code of Conduct remains relevant for our members.
- Developing and signposting relevant training for members, noting that many Trusts source their own training on workplace behaviour.
- Promoting some interventions and toolkits that might help those suffering from inappropriate behaviour such as Active Bystander Intervention Training.
- Raising awareness by actively promoting this issue in a way that those who are not on the receiving end of the behaviour come forward as allies for those who are.
- Developing a framework for lobbying on this issue so the College can advocate at the most senior levels for change in the NHS.
- Examining the culture within RCEM itself and highlighting areas for improvement.

### Membership

The committee will consist of the following voting members, including:

- President
- Vice President
- Co-Chairs of EDI Committee
- Chair Gender Equity Committee
- Chair or nominated deputy of Sustainable Working Practices Committee
- Chief Examiner
- Chair of Training Standards Committee
- Representatives from EMTA, EMSAS and the ACP Forum
- Up to 12 members co-opted from the wider membership
- A representative from the Lay Group

The Committee will select from amongst its number a Chair which might be on a rolling basis or for a specific term of up to three years as agreed by the Committee.

Other members in good standing with the College who wish to assist with this work may be allowed to join meetings by the Chair but these persons would not have a vote in the event that the Working Group called for a vote to decide an issue.

In addition, the following may attend but not vote:

- CEO
- Directors of Corporate Services, Education and Engagement & External Affairs
- The CEO will appoint a committee secretary who shall keep the meeting minutes and circulate the agenda and papers for each meeting.

**Meetings**

The committee will meet online as often as business requires.

**Confidentiality**

Members are required to maintain confidentiality regarding all discussions and decisions unless otherwise agreed by the committee.

# Equity Diversity & Inclusivity Committee

This Committee shall report directly to Council.

## Objectives and Remit

To establish a work programme to address EDI issues across the following areas:

For the College

- Foster and facilitate a culture of open honest communication about equality, diversity, and inclusion issues.
- Commit to continuous self-reflection and (un)learning at both individual and institutional level.
- Provide guidance to ensure that College processes are both inclusionary and equitable.
- Encourage diverse representation at all College committees.
- Where appropriate, respond to requests for comments from Council, its Boards, Committees and Members.

For the membership

- Increase awareness of issues surrounding intersectional equity, diversity and representation within the College, the Specialty and wider NHS by collating and sharing staff disparity data.

Construct and implement solutions to mitigate the negative consequences of conscious and unconscious bias, with the aim of improving the experiences of our members, and consequently, our patients.

- Dismantle and re-design structures, systems and policies that may be upholding inequity within training, curriculum, and examinations.
- Develop and implement evidence-based strategies to promote wellness, career sustainment, and career progression of minoritized staff.

## Membership

The EDI Committee will consist of:

- VP membership
- Committee Chair/Co-Chairs
- EMTA rep
- EMSAS rep
- ACP Forum rep
- Member (appointed)
- Fellow (appointed)
- Lay Committee Member
- Membership will also include 4 appointed members
- Chief Executive and Director of Education

Up to four other members appointed or co-opted as required, subject to budget constraints.

Where possible the membership should be as diverse as possible and aim to ensure that there is good regional representation from across the UK.

As its work plan develops the Committee is encouraged to propose to Council that additional working groups on specific relevant projects are established.

## Meetings

Meetings may take place on a quarterly basis. If members are unable to attend, they should be encouraged to join the meeting by teleconferencing.

## Quorum

The quorum shall be four members, at least one of which should be a Fellow of the College.

## Honours Committee

The objective of the Honours Committee is to coordinate matters relating to national and College honours on behalf of the Royal College. The Honours Committee reports to the Council.

### Membership

Membership of this Committee comprises:

Chair

UK Fellow(s) up to two who may be self-nominated and/or co-opted

Vice President

Chief Executive

**Administrator (Ex-Officio)** The Administrator is an ex-officio member appointed by the Chief Executive and will attend the meeting to record the minutes. The Administrator will not have any voting rights.

**Co-opted Members** The Committee Chair, acting with the support of the Honours Committee, has the power to co-opt up to two additional members

### Responsibilities and powers delegated by Council

- i) To establish criteria for the Royal College nomination of worthy individuals for a national honour.
- ii) To receive, identify and forward nominations on behalf of RCEM of persons worthy of a consideration for a national honour.
- iii) To receive, identify and make nominations to Council persons considered worthy of an Honorary Fellowship of the Royal College of Emergency Medicine
- iv) To make recommendations and issue guidance as the Committee may consider appropriate to Council on the conferment of RCEM medals and other awards.

### Meetings

Meetings are held twice a year and business may also be transacted as the Chair deems appropriate.

### Individual responsibilities

Members of the Honours Committee are expected to maintain the utmost confidentiality and discretion commensurate with their role. They are also expected to be ambassadors for the work of the Royal College, supporting, explaining, and reinforcing RCEM's strategy in promoting those exceptional individuals for national or other honours.

# ACADEMIC CLUSTER

## Academic Committee

### Reports to

The Academic Committee reports to Council.

### Aim

The Academic Committee is strategic in outlook, providing a forum to facilitate and encourage the development of academic strategy and discuss and promote academic developments, whether internally driven or externally.

### Objectives

The Academic Committee has responsibility and accountability for Academic Cluster to the College Council. Its key objectives are:

- Reviewing and updating the Academic Strategy
- Setting priorities for deliverables within Academic Strategy for its lifecycle
- Reviewing and responding appropriately to external initiatives and developments
- Overall responsibility for delivery of the strategy through the other committees / groups
- Developing and supporting College Membership
- Approval and endorsement of Academic policies
- Advise the College Council on Academic matters
- Ensure the College meets the General Medical Council Standards for Postgraduate Medical Curricula, Excellence by Design

### Membership

- Permanent membership of the Committee comprises:
- Dean (Chair)
- Vice President(s)
- Director of Education (Committee Secretary)
- Chair of Training Standard Committee
- Chief-Examiner
- Chair of the Recruitment and Careers Committee
- Chair of Research Committee
- Chair of Educational Resources Committee
- Chair of Global Emergency Medicine Committee
- EMTA Representative
- EMSAS Representative
- ACP Representative
- Chair of ACP Credentialling Committee
- Lay Group Representative

In attendance:

- Associate Director of Exams Head of Training
- Digital Content Manager
- Head of International
- Head of Marketing and Events
- Head of Education Transformation Research



Occasional members:

- Chairs of various working groups
- Experts seconded by either the Dean or Council

## Responsibilities

## Strategy

- To set and maintain an academic strategy that sets out a vision for RCEM as a place for authoritative thinking, world leading expert in Emergency Medicine discipline across, curriculum, research, examinations, careers and educational resources.

## Training Standards

- To maintain and update the Royal College Curriculum to GMC Excellence by Design Standards and new clinical guidance
- To integrate curriculum development with Royal College examinations and educational resources
- To integrate the Curriculum into EM training
- To maintain and develop the ePortfolio to ensure it reflects and supports the Curriculum and developments in EM training and assessment
- To establish and track data from eportfolio and membership databases to inform workforce planning and intelligence.

## Examinations

- To arrange and provide oversight of all examinations
- To recruit and train examiners and maintain high standards of examiner conduct
- To provide quality assurance of the content and standards of the exams
- To provide feedback to candidates and reports to Council
- To maintain up to date Royal College examination regulations
- To working with the TSC in linking EM training and assessment
- To establish and maintain the procedures that govern the College's examinations.
- To integrate curriculum development with Royal College examinations and supporting educational resources
- To liaise with other international partners to develop and quality assure Emergency Medicine examination development with a robust and sustainable strategy and oversight.

## CPD

- To identify training and educational needs for Fellows and Members
- To develop educational strategies and guidance to meet these needs including working with the Research Committee and contributing to the National Conferences
- To support appraisal for Fellows
- To support recertification for Fellows

## Education Research

- To develop an evidence-based foundation for the Royal College's curriculum, training, examinations and educational resources

## Educations Resources

- To develop educational resources to support the education and training needs of the College Membership and Fellowship.
- To integrate curriculum development with Royal College examinations and supporting educational resources to ensure content is relevant and up to date.
- To develop and provide technology enhanced educational resources inline with wider sector developments.

## International

- To liaise with other countries regarding Emergency Medicine examinations and curriculum development and create a robust international strategy for global curriculum development.

## Careers

- To coordinate all activities aimed at developing, promoting and monitoring recruitment and careers information for students and doctors in training grades, and those working in Emergency Medicine, on behalf of the College.

## Meetings

Meetings are held up to four times a year and where possible they should be arranged to coincide with other RCEM committee meetings.

The quorum for this Committee shall be three members, plus the Dean.

## Exams Committee

The Exams Committee reports to the Academic Committee.

### Aim

The Exams Committee has responsibility for the Royal College exam provision across speciality training.

### Responsibilities

- To arrange and provide oversight of all examinations
- To recruit and train examiners and maintain high standards of examiner conduct
- To provide quality assurance of the content and standards of the exams
- To provide feedback to candidates and reports to Council
- To manage the Royal College Examination Regulations
- To working with the TSC in linking EM training and assessment
- To establish and maintain the procedures that govern the College's examinations.
- To integrate curriculum development with Royal College examinations and supporting educational resources
- To liaise with other international partners to develop and quality assure Emergency Medicine examination development with a robust and sustainable strategy and oversight.

### Membership

Membership of the Committee comprises:

- Chair of the Exams Committee (Chief Examiner)
- Lead Examiner MRCEM Primary
- Lead Examiner MRCEM Intermediate SBA
- Lead Examiner MRCEM OSCE
- Lead Examiner FRCEM Final SBA
- Lead Examiner FRCEM OSCE
- Lead for Examiner Development
- Deputy Lead Examiner MRCEM Primary
- Deputy Lead Examiner MRCEM Intermediate SBA
- Deputy Lead Examiner MRCEM OSCE
- Deputy Lead Examiner Final SBA
- Deputy Lead Examiner FRCEM OSCE
- Deputy Lead for Examiner Development
- EMTA Representative(s)

- EMSAS Representative(s)
- Lay Representation
- Dean
- Director of Education
- Head of Exams
- Head of Quality and Standards
- Head of Psychometrics

In attendance:

- Exams Operations Manager (Systems and Processes)
- Candidate Team Manager
- OSCE Delivery Manager
- Exam Policy and Appeals Officer
- Head of Training

## Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of the Exam Committee.

## Educational Resource Committee

The Educational Resources Committee reports to the Academic Committee.

### Aim

To aim of the Educational Resources Committee is to oversee the provision of the College's educational resources for all members and fellows.

### Responsibilities

- To develop educational resources to support the education and training needs of the College Membership and Fellowship; including the College Conferences and study days
- To integrate curriculum development with Royal College examinations and supporting educational resources to ensure content is relevant and up to date
- To develop and provide technology enhanced educational resources in line with wider sector developments

### Membership

Membership of the Committee comprises:

- Chair of the Educational Resources Committee
- President
- Vice-President
- Treasurer
- Dean
- Appointed Members and Fellows x 10
- Director of Education
- Events Manager
- EMTA Representative
- EMSAS Representative
- EDI Committee Representative
- WEMSIG Representative
- eLearning Manager

### Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of the Educational Resources Committee.

## eLearning Committee

The eLearning Committee reports to the Educational Resources Committee.

### Aim

The aim of the eLearning Committee is to develop content and supporting technical functionalities to support College educational objectives in line with curriculum and members requirements and expectations.

### Responsibilities

- To develop eLearning resources to support the education and training needs of the College Membership and Fellowship
- Ensure the eLearning solutions are aligned with its curriculum and member/user expectations and requirements
- To integrate curriculum development with relevant committees to ensure content is relevant and up to date
- To develop and provide technology enhanced educational resources in line with wider sector developments

### Membership

Membership of the Committee comprises:

- Chair of eLearning Committee
- Creative Lead
- Chair of the Educational Resources Committee
- Dean
- Director of Education
- eLearning Manager
- Content Editors - (Blogs, Clinical Cases, Learning Sessions, Podcasts, Research, SBA, ERB)
- EMTA Representative
- EMSAS Representative
- ACP Representative

### Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of the eLearning Committee.

## Ultrasound Committee

The Ultrasound Committee reports to the Educational Resources Committee.

### Aim

The aim of the Ultrasound Committee is to develop resources to support the delivery of ultrasound competences within the EM curriculum including preferred methods of assessment.

### Responsibilities

- Develop point of care ultrasound skills (PoCUS) competences within the curriculum.
- Ensure PoCUS is clearly identified within the curriculum as a training/assessment tool at any point of revision of the curriculum
- Advise the Training Standards Committee in the quality assurance of high quality training for Emergency Physicians
- Work with other groups within the College to update existing and develop a range of resources over and above in PoCUS training, to support the delivery of the curriculum including skills maintenance for trainers
- To inform Educational Resources Committee of updates in relation to ultrasound
- Advise exam and ePortfolio Team of developments in ultrasound assessments
- Consult on ultrasound inclusion in any proposed programme of learning
- Address regional variation in the assessment of competences of ultrasound and maintain oversight

### Membership

Membership of the Committee comprises:

- Chair of the Ultrasound Committee
- PEM Lead
- Chair of the Educational Resources Committee
- eLearning Manager
- RCEM Course Leads
- Head of School Representation
- EMTA Representative
- EMSAS Representative
- ACP Representative
- Lay Advisor Representative
- Two Ordinary Fellows

Invited Members:

- Dean
- Director of Education

- Chair of TSC
- Chair of Curriculum Sub-Committee

## Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of the Ultrasound Committee.



## **Emergency Medicine Physicians Associates Short Life Working Group**

This Physicians Associates Short Life Working Group reports to Academic Committee and sits in the Academic Cluster. It has the following terms of reference.

### **Remit**

To develop for Council approval a strategy that outlines what the College offering for Physicians Associates could be, this to include aspects of capacity and supervision. There will be a need to also review and suggest improvements to the published material the College has in place.

### **Membership**

To include:

- Chair: The Dean
- Vice President Education
- Director of Education
- Two Fellows who are to be consultant representatives
- EMTA representative
- EMSAS representative
- ACP representative
- Faculty of Physicians Associate representative
- Lay Group Representative
- Other individuals with specific expertise can be co-opted onto the Working Group subject to budget

Ex-officio members include the Head of Training, Curriculum Operations Manager, Senior Training Officer, Director of Engagement & External Affairs (or nominated deputy).

### **Quorum**

The quorum shall be 50% of the voting members whether they are present at that meeting or not.

### **Meetings**

The group intends to meet as and when business requires by video conference call or in person.

## Recruitment & Careers Committee

### Reports to

The Recruitment and Careers Committee reports to the Academic Committee.

### Aim

To coordinate all activities aimed at developing, promoting and monitoring recruitment and careers information for students and doctors in training grades, and those working in Emergency Medicine, on behalf of the College.

### Responsibilities

- Examine recruitment and retention data; including ACCS data
- Define data analysis requirements for the Workforce Psychology Group in relation to recruitment and retention
- Monitor and improve relations and activities across MSRA question writing
- Develop material for use in national and local careers fairs
- Maintain the careers section of the College website
- Collaborate with BMJ careers, NHSE WTE and other national bodies over publicising the careers
- Collaborate with foundation schools and universities in providing material and promoting EM as a career
- To monitor attrition and provide information on exit reasons, in conjunction with TSC
- To support career development for staff grade, locally employed doctors and ACPs in emergency medicine
- Work with NHSE WTE and the devolved equivalents to compile the person specifications for entry to EM specialty training
- Work with NHSE WTE and the devolved equivalents, other Royal Colleges and Deaneries to manage recruitment, including national recruitment to specialty training for the College
- Work with NHSE WTE to Manage (including monitoring) the review, planning & advertising of the recruitment cycle via NHSE WTE & RCEM channels.
- Analyse annual recruitment data, trainee progression and performance to enable trends and data based decisions to be made.
- Ensure RCEM website information on recruitment remains accessible, up to date and accurate
- Liaise with Medical and Dental Recruitment and Selection (MDRS), NHSE WTE national recruitment teams, educational psychologists, other Royal Colleges, Faculties, and Intercollegiate groups
- Influence recruitment numbers/sustainability/expansion of speciality where possible, in conjunction with TSC
- To develop a network of local careers advisors in each LETB/Deanery
- To work with college conference organisers to develop careers workshops
- Liaise with PSC over sustainability and the workforce strategies
- Conduct any other careers activities at the request of the College Academic Committee

### Membership

Membership of the Committee comprises:

- Chair(s) of the Recruitment and Careers Committee
- EMTA Representative x 2
- Foundation Doctors x 2
- ACP Representative Forum x 2
- EMSAS Representative x 2
- Dean
- VP Education
- Chair of TSC
- ACCS Recruitment Lead
- DRE-EM Recruitment Lead
- Director of Education
- Head of Training

- Lay Representative

### Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson(s).

The quorum for this Committee shall be three members, plus the Chair of the Committee.

## Research Committee

The Research Committee reports to the Academic Committee.

### Aim

- To promote the development of academic emergency medicine through research.

### Responsibilities

- To develop an evidence-based foundation for the Royal College's curriculum, training, examinations and educational resources
- Actively participate in and directing the development of Academic Emergency Medicine
- Engage with UK academic structures on behalf of the Royal College (e.g. Academy of Medical Royal Colleges Academic Leads)
- Administrator the Royal College Research Fellowships and Grants
- Organise the Royal College Scientific Meetings and for advise the Royal College Council
- Update the College Council, Academic Committee and committees within the Academic Cluster on matters related to Academic Emergency Medicine research
- Liaise the QEC on matters of mutual interest
- Manage the process and systems for the approval, presentation, standardisation and publication of RCEM publications, which are to be approved by Council
- Provide guidance to careers committee to promote, support and develop a sustainable academic Emergency Medicine workforce

### Membership

Membership of the Committee comprises:

- Chair of the Research Committee
- Vice-Chair of the Research Committee
- President
- College Officers
- RCEM Members x 7
- EMJ Editor
- RCEM Professors x 2
- RCEM Associate Professors x 4
- Lead of Academic Department of Military Emergency Medicine (ADMED)
- RCEM PhD Fellows and academic training representatives at different stages x 3
- EMTA Representative
- WEMSIG Representative
- Nursing Representative
- Trainee Emergency Research Network (TERN) Fellow
- Lay Member

In attendance:

- Dean
- Director of Education
- Research Policy Manager
- Immediate past appointed holders

## Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of the Research Committee.

## Membership Appointment Requirements

Position	Appointment Requirements	Term of Office
Chair	Elected from the membership of the Research Committee subject to ratification by the Royal College Council. The process of election will be for the out-going Chair to determine but will include inviting written applications and CVs in support and may include the appointment of a selection panel from within the Committee to make a short-list of candidates from which the Chair is elected by the Committee. In his/her absence a nominated member (e.g. one of the Royal College Professors) shall be Chair.	3 year term of office, with the possibility of an extension is agreed by Council. No more than two terms of office
Vice-Chair	Elected from the membership of the Research Committee subject to ratification by the Royal College Council.	3 year term of office, with the possibility of an extension is agreed by Council. No more than two terms of office
President	As per the Bye Laws	As per Council ToR
Vice-President(s)	As per the Bye Laws	As per Council ToR
College Members	Ordinary membership is advertised in open competition and applications are assessed by the senior members of the committee. Nominations will then be	Normal term of 3 years but extension possible if agreed by council

	passed to the Royal College Council for approval.	
EMJ Editor	Current EMJ Editor	For duration of tenure as Editor
RCEM Professors	Invitations for application are every 2-4 years. Two RCEM Professors at any one time on a rolling 2 year appointment basis. Shortlisting and appointment through Research Committee with Council approval.	4 year term.
RCEM Associate Professors	RCEM Associate Professors are appointed following application and serve a term of 4 years. If not already members of the committee they will be invited to sit on the committee as additional members during their term.	4 year term.
Lead of Academic Department of Military Emergency Medicine (ADMEM)	Current Defence Professor of Emergency Medicine (or head of ADMEM)	For duration of tenure
RCEM PhD Fellows and academic training representatives at different stages	Appointed for the duration of their doctoral studies or academic clinical fellowship / lecturer appointment. This may include RCEM PhD fellows plus additional academic trainee representatives	3 years (normally)
EMTA Representative	Nominated by EMTA	2 years
WEMSIG Representative	Nominated by WEMSIG	For duration of tenure on WEMSIG
Nursing Representative	Application by submission of interest, then appointed by the committee	3 years
Trainee Emergency Research Network (TERN) Fellow	Appointed by competitive application and interview. Invited to give TERN update at alternate meetings	2 years
Lay Member	To be selected/nominated from the Lay Advisory Group and approved by the Royal College	Co-terminus with Lay Group appointment
Dean	As per the Bye Laws	As per Council ToR
Director of Education	Current post holder	On-going
Research Policy Manager	Current post holder	On-going

Immediate past appointment holders	Immediate past Chair and RCEM Professors will be invited to continue their contribution to the committee.	3 years
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## Training Standards Committee

The Training Standard Committee reports to the Academic Committee.

### Aim

The Training Standards Committee has responsibility for translating the Royal College's aims for specialty training in EM into working systems throughout the UK across the EM workforce.

### Responsibilities

#### Training

- Develop the content and structure of the EM training programme
- To integrate the Curriculum(s) into EM training
- Oversee the enrolment of EM trainees
- Recommend trainees to the GMC for specialist registration
- Monitor the progress of trainees' CCT recommendations
- Provide feedback on the function of the ePortfolio to support training activities
- To establish and track data from ePortfolio and membership databases to inform workforce planning and intelligence.

#### Quality

- Work with Post-Graduate Deaneries and the GMC, and offer advice, to set the standards for the approval of departments for EM training
- Agree processes by which external assessors can be provided to participate in ARCP panels and Deanery quality visits
- Compile and submitting the annual specialty report on training to the GMC

#### Medical Training Initiative

- Agree the standards for GMC registration via the sponsorship route and administering sponsorship applications.

Oversee the work of the following Committees in relation to the responsibilities listed below:

#### Curriculum Sub-Committee

- Support the work of the Curriculum Sub-Committee to update and develop the curriculum
- Ensure that impact and guidance to trainee's and training supervisors is considered

#### Recruitment Committee

- Work with HEE and the devolved equivalents to compile the person specifications for entry to EM specialty training
- Work with HEE and the devolved equivalents, other Royal Colleges and Deaneries to manage recruitment, including national recruitment to specialty training for the College

#### CESR Committee

- Ensure that the evaluation of applications for specialist registration in EM by the Certificate of Eligibility for Specialist Registration route meets the required standards
- Monitor the posts and pathways recognised for entry to training for CESR
- Provide support for the introduction of new standards determined by the GMC

#### Advance Clinical Practitioners Credentialing Committee

- Ensure that the credentialing of Emergency Care Advance Clinical Practitioners meets the required standards
- Monitor the evaluation of potential developments for Emergency Care Advance Clinical Practitioners
- Provide support for the introduction of equivalency with HEE work for the RCEM credentialing process

#### Membership

Membership of the Committee comprises:

- Chair of Training Standards Committee
- TSC Vice-Chair, CESR Committee Chair
- TSC Vice-Chair, ACP Credentialling Committee
- TSC Vice-Chair, Curriculum Sub-Committee Chair
- TSC Vice-Chair, Chair of Recruitment Committee
- Vice-President (Education)
- TSC Quality Lead
- HST Lead
- ACCS Lead
- DRE-EM Lead
- MTI Lead
- Regional Heads of School/Heads of Training; including Wales, Scotland and Northern Ireland
- RCPCH Representative
- Paediatric Emergency Medicine Lead
- Pre-Hospital Emergency Medicine Representative



- Intensive Care Medicine representative who must be an emergency physician nominated by the Faculty of Intensive Care Medicine
- EMTA Representative(s)
- EMSAS Representative(s)
- Lead Postgraduate Dean
- President of the Royal College
- Dean
- Director of Education
- Lay Representation
- Head of Training

In attendance:

- Head of Examinations
- ePortfolio Manager
- eLearning Manager
- Head of International
- EDI Committee Representative (as required)

## Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of Training Standards Committee.

## Advanced Clinical Practitioners Credentialling Committee

The Advanced Clinical Practitioners Credentialling Committee reports to the Training Standards Committee.

### Aim

The aim of the Advanced Clinical Practitioner Credentialling Committee is to develop, plan, evaluate and quality assure the credentialing of Emergency Care Advanced Clinical Practitioners.

### Responsibilities

- To review and maintain the Curriculum for Emergency Care Advanced Clinical Practitioners
- To review, maintain, develop and quality assure the ECACP Assessment Structure and Credentialling Process
- To develop and maintain ECACP protocols, guidelines and other documentation as necessary
- To ensure that the ePortfolio and IT mechanisms that support the ECACP processes are fit for purpose and offer an excellent user experience for both ECACPs and assessors
- To integrate curriculum developments with existing ECACP processes and guidance
- To provide regular reports on the health of ECACP progress to relevant College committees
- To develop and maintain ECACP guidelines and supporting communication
- To respond to external requests for curriculum changes or advice

### Membership

Membership of the Committee comprises:

- Chair
- ACP Curriculum Lead
- College of Paramedics representative
- Royal College of Nursing representative
- Chair of the RCEM Training Standards Committee
- Consultant Nurse Representative
- Trainee ACP Representative
- Credentialed ACP Representative
- Two RCEM Ordinary Fellows
- CSC Representative
- ACP and PA Training Officer

Optional Attendees

- Dean (ex officio)

- Director of Education
- Vice-President Education
- Head of Training

In attendance:

- ePortfolio Manager
- eLearning Manager

## Meetings

The committee meets three times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of the Clinical Advance Practice Credentialling Committee.

## Curriculum Sub-Committee

The Curriculum Sub-Committee reports to the Training Standards Committee.

### Aim

The Curriculum Sub-Committee has responsibility to review and maintain the Curriculum for training in Emergency Medicine and, as a result, has delegated powers from Council to decide on the content and nature of the Curriculum.

### Responsibilities

- Maintain and update the Royal College Curriculum to GMC Excellence by Design Standards and new clinical guidance
- Liaise with other Royal Colleges, Faculties and Intercollegiate groups including the Intercollegiate Committee for ACCS training
- Consult on proposed curriculum changes
- Prepare Curriculum changes for submission to GMC via annual CAG process
- Respond to external requests for curriculum changes
- Integrate curriculum development with Royal College examinations and educational resources
- Implement change and undertake evaluation of that change via ePortfolio
- Provide information as required for the annual specialty report to the GMC
- Develop a WPBA strategy to support the implementation of the curriculum via ePortfolio
- Lead on the review of the curriculum in line with GMC guidelines and requirements
- Provide support to other committees on curricula issues

### Membership

Membership of the Committee comprises:

- Chair of Curriculum Sub-Committee
- ACCS Trainer Representative
- HST Trainer Representative
- Paediatric EM Trainer Representative
- Pre-Hospital EM Trainer Representative
- Curriculum Development Lead (appointed via TSC)
- Four ordinary fellows
- EMTA HST representative (nominated/elected by EMTA)
- EMTA ACCS Trainee Representative (as appointed to Intercollegiate Committee for ACCS Training)
- Lay Representative
- Head of Training

Optional Attendees

- Dean (ex officio)
- Director of Education

In attendance:

- Head of Quality and Standards
- ePortfolio Manager
- eLearning Manager

## Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of Curriculum Sub-Committee.

## Portfolio Pathway Committee

### Reports to

The Portfolio Pathway Committee reports to the Training Standards Committee. This Committee was formally known as the CESR Committee.

### Aim

The Portfolio Pathway Committee has responsibility to develop, plan, evaluate, publicise and quality assure the Certificate of Eligibility for Specialist Registration standards for the College.

### Responsibilities

- To develop and maintain Portfolio Pathway processes and protocols across all standards and pathways
- To liaise with other Royal Colleges, Faculties and Intercollegiate groups as appropriate in relation to Portfolio Pathway activity
- To produce and comment on workforce data in line with Portfolio Pathway applications and trends
- To ensure that the ePortfolio and IT mechanisms that support the Portfolio Pathway processes are fit for purpose and offer an excellent user experience for both candidates and evaluator
- To integrate curriculum requirements and developments with existing Portfolio Pathway processes and guidance
- To provide regular reports on the health of the Portfolio Pathway progress to relevant College committees
- To develop and maintain Portfolio Pathway guidelines and supporting communication
- To respond to external request to standard changes
- Promote Portfolio Pathway Evaluator, Leads/Supervisor, Applicant days and the Portfolio Pathway report on the outcomes of these days

### Membership

Membership of the Committee comprises:

- Chair of Portfolio Pathway Committee
- CSC Representative
- EMSAS Representative x 2, 1 of which should be a current CESR applicant\*
- RCEM Portfolio Pathway/CCT members x 2
- Senior Training Officer (Committee Secretary)
- EDI/GEC Representative
- Lay Representative

Optional Attendees

- Dean (ex officio)
- Director of Education
- Vice-President Education

In attendance:

- Head of Training
- Training Manager
- eLearning Manager

## Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of the Portfolio Pathway Committee.

## Global Emergency Medicine Committee

The Global Emergency Medicine Committee reports to the Academic Committee.

### Aim

To aim of the Global Emergency Committee is to establish RCEM as a world-leader in the development of global EM that is clinically excellent, evidence-based, compassionate and equitable.

### Responsibilities

#### Governance

- Provide oversight of the governance GEM programmatic work undertaken on behalf of the College.
- Ensure alignment of GEM activities with RCEM's strategic priorities and compliance with international standards for emergency care.
- Provide guidance and support for the development and implementation of the GEM strategy.
- Contribute to the alignment and delivery of the key RCEM strategies including International.
- Membership strategy and Academic strategy, promoting engagement with and support for international members.

#### Advocacy

- Contribute to the implementation of key World Health Assembly (WHA) resolutions by supporting the global EM community in achieving their goals of universal health coverage and improved emergency care systems, including but not limited to:
- WHA Resolution 76.2: Integrated emergency, critical, and operative care for universal health coverage and protection from health emergencies.
- WHA Resolution 72.16: Emergency care systems for universal health coverage, ensuring timely care for the acutely ill and injured.
- Advocate for the development and maintenance of EM services in low-resource settings and regions affected by disaster and/or conflict.
- Support and champion initiatives worldwide that align with RCEM values, fostering partnerships and networks that enhance global emergency care systems.
- Promote awareness and understanding of the critical role of emergency care in achieving universal health coverage, particularly among policymakers, donors, and international organisations.

#### Education and Curriculum Development

- To support the response to international requests to RCEM for localised EM curriculum development.
- To provide guidance to the examination team with respect to overseas exam provision upon request.
- To Provide advice and recommendations for members to work internationally through the College website and newsletters, EMJ, social media and GEM days at the college.
- Promote participation in bi-directional learning collaborations, observer fellowships, research projects, and capacity-building efforts to expand opportunities for healthcare professionals to contribute to and learn from GEM initiatives.



- Work with relevant College Committees to support and encourage GEM OOPes (where possible considered for training) including academic, clinical and managerial opportunities (including humanitarian work).
- Work with the RCEM curriculum sub-committee to integrate relevant global health competencies into any new iterations of the UK RCEM EM curriculum.
- Liaise with equivalent global health committees of other Royal Colleges and relevant bodies, including international EM societies and professional bodies.
- Influence the quality of care in Emergency medicine internationally by sharing and promotion of good practice, standards and quality improvement projects including supporting the development of resources for EM systems globally.

### Representation and Network Building

- Provide a network for RCEM members and fellows involved in GEM.
- Promote global EM activities to RCEM members and fellows.
- Support the inclusion and professional development of International Medical Graduates (IMGs) through initiatives such as the Medical Training Initiative (MTI) programme, fostering skills transfer and building capacity in underserved regions.

### Membership

Membership of the Committee comprises:

- Chair of the Global Emergency Medicine Committee
- Director of Education
- Dean
- Head of International
- EMFP/EM core Lead
- MTI Lead
- Lay Representative
- Research representative
- Equality, Diversity & Inclusion Committee representative
- Gender Equity Committee representative
- EMTA representative
- EMSAS representative
- Phasing of 8 representatives with experience in global health work in LMIC resource settings to 4-6 with focus on regions – Asia, MENA, East Africa, West Africa
- Curriculum representative
- Relevant College Officers as and when required

In attendance:

- Other College staff as appropriate.

### Meetings

The committee meets four times a year. All members should endeavour to attend but deputies can be sent with the agreement of the Chairperson.

The quorum for this Committee shall be three members, plus the Chair of the Global Emergency Medicine Committee.

## **MEMBERSHIP & PROFESSIONAL MATTERS CLUSTER**

### **Emergency Medicine Advanced Clinical Practitioners' Forum (ACP Forum)**

The Emergency Medicine Advanced Clinical Practitioners' Forum (ACP Forum) reports to Council and shall have the following terms of reference:

#### **Remit**

- To provide a focus and representation for ACPs and trainee ACPs (tACPs) within the College
- To encourage active involvement of all ACP associate members to shape the development of Emergency Medicine as a specialty and improve their own training experience
- To provide a structure for ACP associate members to highlight issues specific to ACPs and represent their views on Council and RCEM Committees.
- Support the planning and delivery of the ACP conference

#### **Membership**

Membership of the ACP Forum shall be limited to those working in Emergency Medicine who are Associate Members (ACP) of the Royal College of Emergency Medicine in good standing.

The composition of the ACP Forum shall ensure national representation of the four nations of the UK, as well as role specific areas in line with the RCEM Clusters including a chair and secretary (acting as deputy in Chair's absence) plus eight other roles listed below:

ACP Forum Chair

ACP Forum Secretary (will deputise for Chair and be communications lead)

ACP Forum National Lead Scotland

ACP Forum National Lead Wales

ACP Forum National Lead Northern Ireland

ACP Forum National Lead England

ACP Forum Credentialing Committee Rep

ACP Forum Academic Committee Rep

ACP Forum AHP Professions Rep

ACP Forum Events and CPD Rep

ACP Forum Quality (QIA) Rep

ACP Forum Quality (Leadership and Service Development) Rep

ACP Forum Paediatric Rep

ACP Forum EDI Rep

The Chair Secretary and national leads are elected following a ballot of all Associate Members (ACPs) in good standing. The process is that nominees must be proposed by one other Associate Member (ACP) in good standing. If uncontested, nomination is put before the ACP Forum for approval. If contested, then there is an election, the electorate being Associate Members (ACP) of the Royal College of Emergency Medicine in good standing.

All the other area specific roles will be appointed using a college interview process. The terms of office will be three years.

The following are the key relationships the role holders will have.

- Chair of ACP Sub-Credentialing Committee Ex-officio
- President Ex-officio
- Vice President Membership Ex-officio
- Dean Ex-officio
- Director of Education Ex-officio
- Administrator Ex-officio

All vacancies will be advertised by the College at least two months before the end of the term of office. Applicants for all roles will be required to submit a personal statement outlining their suitability for the role supported by a proposer and seconder. As above, the Chair, Secretary and National representatives shall be elected following a ballot of Associate Members (ACPs) in good standing within the relevant region, whilst the remaining roles will be elected by interview process.

### **Responsibilities**

- Ensure the views of Associate Members (ACPs) are communicated to the Royal College of Emergency Medicine and to disseminate information about changes to training or provision from those committees, by actively attending and participating in meetings for which you have responsibility
- Ensure good communication is maintained with Associate Members (ACP)
- Share good practice and ideas for improvement to training and safeguard the educational needs of tACPs as far as possible
- Ensure ~~regional~~ representatives update the ACP Forum and relevant committees on national views and opinions
- Represent ACP and tACP views by membership of the relevant committees of the Royal College of Emergency Medicine and to ensure two-way communication between ACP Forum members and the Royal College
- Provide advice and nominate representative to the Royal College and its committees on invitation
- Circulate a summary of points raised after each Royal College committee meeting drawn up by the relevant representatives for review at the next ACP Forum meeting
- Provide notes of the meetings of the ACP Forum meeting
- Provide regular updates on current issues via the EMJ supplement
- Communicate with all representatives before parent committee meetings to ensure all views and concerns are voiced and each representative has a duty to reply
- Disseminate information about changes to ACP Credentialing to Associate Members (ACP)
- Encourage social discourse and shared learning by the organisation of an annual conference open to all ACPs

Meetings: up to four times a year

## Emergency Medicine Trainees' Association (EMTA)

### TERMS OF REFERENCE

Approved by RCEM Council: For March 2025

Council Last Updated: February 2025

Next Review Due: February 2029 (Every other chair cycle)

#### Terms of Reference

1. Introduction
  - Core Purpose and Values
  - Alignment with RCEM Strategic Priorities
3. Structure
  - 3.1 EMTA Committee
  - 3.2 Appointment Terms
  - 3.3 EMTA Executive
- 4 Responsibilities
5. Meetings
6. Quorum and Voting for EMTA Committee
7. RCEM Commitments
8. Recognition
9. Changes to Terms of Reference

#### Summary of changes from 2020 Terms of Reference (by Claude.ai)

These changes appear to reflect a significant evolution in the organisation's governance and operational structure.

#### Core Purpose and Values

The new document introduces a clear statement of core purpose and values, which was absent in the 2020 version. This addition emphasises EMTA's focus on improving training quality, parity of delivery, and RDiT wellbeing. The new version also explicitly states anti-discriminatory principles and the importance of role modelling, which represents a more modern approach to organisational governance.

#### Strategic Alignment

A completely new section on alignment with RCEM Strategic Priorities has been added. This demonstrates a more sophisticated relationship between EMTA and the College, with clear mapping of how EMTA's work supports broader RCEM objectives across sustainable careers, education, clinical standards, research, and organisational development.

#### Structural Changes

The new document introduces significant structural changes:

- The Executive structure has been expanded with three distinct Vice Chair roles (Policy, Communications, and Training), reflecting a more sophisticated division of responsibilities

- Introduction of specific clusters for different areas of work, making the organisation more systematically organised
- Reduction in the maximum number of specific duties from three to two per RDiT, likely promoting wider participation
- Change in Chair term length from 18 months to 2 years, providing more stability in leadership

### **Governance Improvements**

Several new governance mechanisms have been introduced:

- A formal process for votes of no confidence, requiring simple majority
- More detailed quorum requirements, particularly for policy disagreement scenarios
- Introduction of a Memorandum of Understanding with RCEM for managing disagreements
- Clearer processes for co-chair succession and interim arrangements

### **Meeting Structure**

The new document provides more detailed meeting requirements:

- Specification of meeting lengths (3-4 hours for formal meetings)
- Introduction of Vice Chair Cluster meetings
- Requirement for one in-person meeting including training  
More structured approach to Executive meetings

### **Commitments and Recognition**

The new version includes enhanced commitments from RCEM and introduces a new section on recognition of committee members' contributions, including:

- Support for professional leave
- Evidence provision for portfolios
- Recognition of time for Education Development Time records

These changes suggest a maturing organisation with more sophisticated governance structures and clearer processes for managing both internal operations and external relationships. The new document appears to better reflect the complex role EMTA plays in representing RDITs while maintaining productive collaboration with R

## 1. Introduction

The UK Emergency Medicine Trainees' Association (EMTA), hereafter referred to as the Association, represents Emergency Medicine RDiT Doctors in Training (RDiT). The term “trainee” and “resident doctor in training” may be used interchangeably. RDiT is the more formal terminology and will be used throughout the rest of this document. All RDiT members of the College are automatically members of the Association upon receiving their national training number and College membership.

### Core Purpose and Values

The Association exists to improve training quality, parity of its delivery and the well-being of RDiT. This is principally achieved by providing a collective, representational voice and focal point for Emergency Medicine RDiT. That voice is to be heard in all matters shaping training and the delivery of Emergency Medicine; recognising that the highest standards in care are achieved through the highest standards in training.

In achieving our objectives, we must:

- Actively protect and nurture high-quality training in Emergency Medicine at every step
- Provide meaningful and genuine representation through consultation and active listening
- Be representative, accountable, credible and transparent in all our activities
- Be anti-discriminatory and vigilant for policy which may adversely affect any RDiT groups
- Role model and inspire through our behaviour to shape the specialty for current and future generations

### Alignment with RCEM Strategic Priorities

EMTA will develop strategy and RDiT support in line with RCEM's goals outlined in the Corporate plan by:

- **Promoting Sustainable Careers:** Advocating for work-life balance, staff wellbeing and fair training practices. Supporting flexible career paths and protecting the mental and physical health of all staff.
- **Delivering High-Quality Education:** Contributing to examination reforms and curriculum updates. Ensuring training programmes are well-crafted with protected time and resources.
- **Support Clinical Standard Development:** Participating in quality, safety and policy initiatives while safeguarding training quality.
- **Enhancing Research and Advocacy:** Engaging openly and assertively on RDiT interests whilst working constructively with RCEM to improve policy and develop evidence-based approaches.
- **Organisational Development:** Working alongside RCEM to strengthen RDiT support structures whilst maintaining transparent processes and recognising the importance of diversity in strengthening frontline services. Evolving our structures to better reflect the College can act as a capacity-building mechanism for future RCEM leadership.

Substantive changes to RCEM governance are to be made known by the CEO to the Associate if they believe an earlier review of the Terms of Reference is required in response. We encourage a review every 4-6 years.

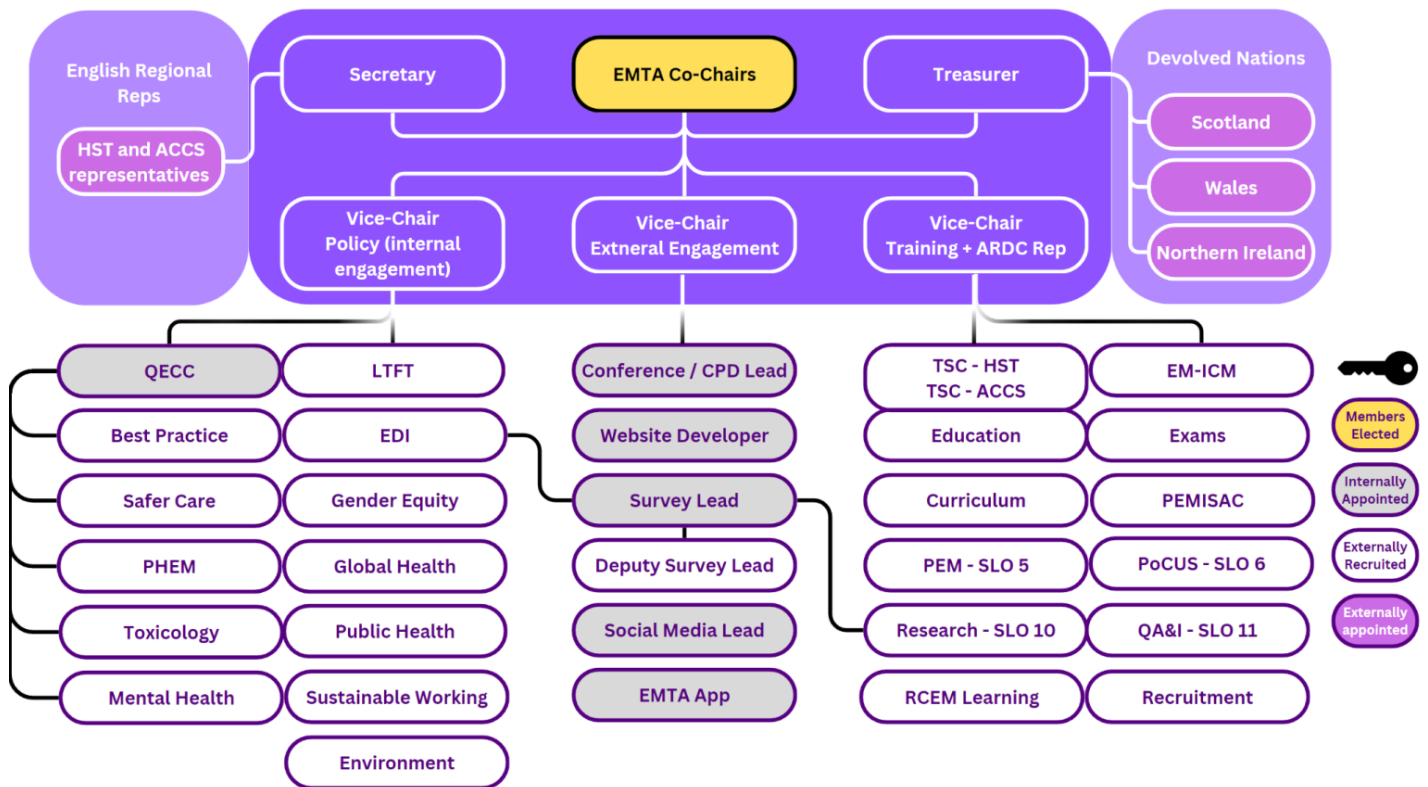
### 3. Structure

#### 3.1 EMTA Committee

The Committee comprises representatives, known as “EMTA reps”, to College committees. As well as individuals focused on the Association’s strategic functions, engagement offerings and external influence. Committee member roles and responsibilities will be defined in a separate document maintained by the EMTA Committee with joint agreement from the College’s Head of Training.

The below infographic outlines how EMTA reps are clustered. For more details on roles and responsibilities consult the EMTA roles document ([click here](#)).

Figure 1. EMTA Governance structure





### **3.2 Appointments and Terms**

- Must be current UK Emergency Medicine RDiTs with a National Training Number (NTN) or Dean's Reference Number
- Must have a minimum of one year before CCT from the role's start date
- Maximum of two specific duties per RDiT (excluding deputy roles)

Appointment process - At the Chair(s) discretion, they may approach the Nominations and Appointments committee for assistance.

- The EMTA Chair(s) will be elected by the full RDiT membership following an open application process using single transferable voting. Typically aligned to the EMTA conference timeline.
- EMTA Executive positions are appointed by the Committee following the internal election of established EMTA committee members. If there are no suitable candidates, this will be open to the wider membership.
- Typically, executive roles will be appointed out of sync with the year new Chairs are in place to support continuity.
- Other appointments will be made by open application and decided by a panel including the Chair(s) and Committee representatives.
- Terms are for 2 years with the possibility of one 2-year extension upon mutual agreement. This is shorter than the College's 3 years to increase opportunities for RDiTs' whose programmes are 6 years.
  - Chair(s) may only do a maximum of 2 years. In the event of no replacements, they may continue until a suitable replacement is found with active recruitment run every 3-6 months.
- No member may hold more than 2 specific duties within EMTA unless under exceptional circumstances as agreed by Council. Not including external representative roles.
- No one can sit on the EMTA committee for longer than 10 years of aggregated service.

### **3.3 Co-chair stepping down**

- In the event of a co-chair stepping down the committee may appoint an interim if the term was due to end within one year. Typically aligned to the EMTA conference.
- If over 1-year was left in the position, an election should be held.

### 3.3 EMTA Executive

The Executive have specific portfolios required to coordinate improved advocacy, engagement and contributions. They will work to form relationships across the College key staff to support delivery of RCEM objectives in line with EMTA's purpose. It comprises:

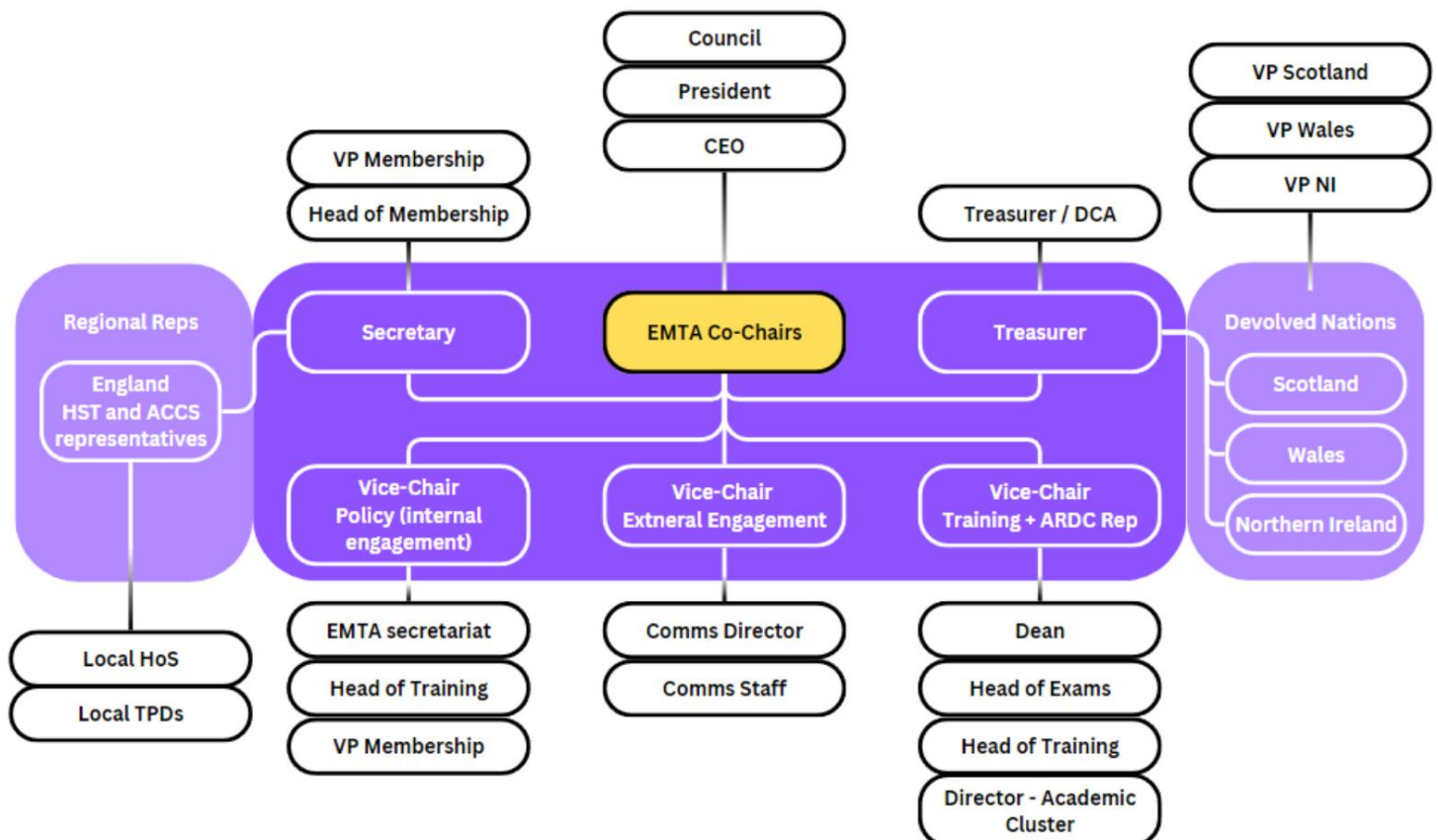
- Chair(s)
- Vice Chair - Policy (internal affairs)
- Vice Chair - Communications (member engagement)
- Vice Chair - Training (external affairs)
- Secretary – Regional Representatives
- Treasurer -Four nation alignment

EMTA communication functions and management

- Conference Lead
- Survey Lead
- Regional Representatives Lead
- Website Lead
- Social Media and App Lead

The Executive reports to the Chairs and RCEM Executive/Senior Leadership Team.

Figure 2 - EMTA Executive, regional representative structures and RCEM reports



## 4. Responsibilities

Figure 3 - Annualised Overview of EMTA's core functions

### EMTA Annual Activity Overview

Repeat this cycle 3 times annually

**Operational Clusters**  
Reps report to their cluster VCs help identify elements needing escalation Form specific ideas and plans Support each other to deliver outputs

**Tactical Executive**  
Exec help direct people to the resources they need, help find resource and facilitate cross silo working Filter issues to wider group where training body opinion needed

**Strategy setting and overview**  
Priority areas reinforced and alignment on reps objectives to improve success. Promote whole group discussions to shape overall groups direction. Report progress on high-priority items

#### In-person meeting

**All-day meeting split to enable**

- All reps report by cluster
  - 1 hour per cluster (5 minutes per rep)
- 30 minutes of discuss per cluster - Facilitated
- Training element - 30 minutes
- Strategic Overviews (Chairs' Update) - 45 minutes
- RCEM / Training element - 45 minutes
  - Leadership, skills

#### Accountability and milestoning

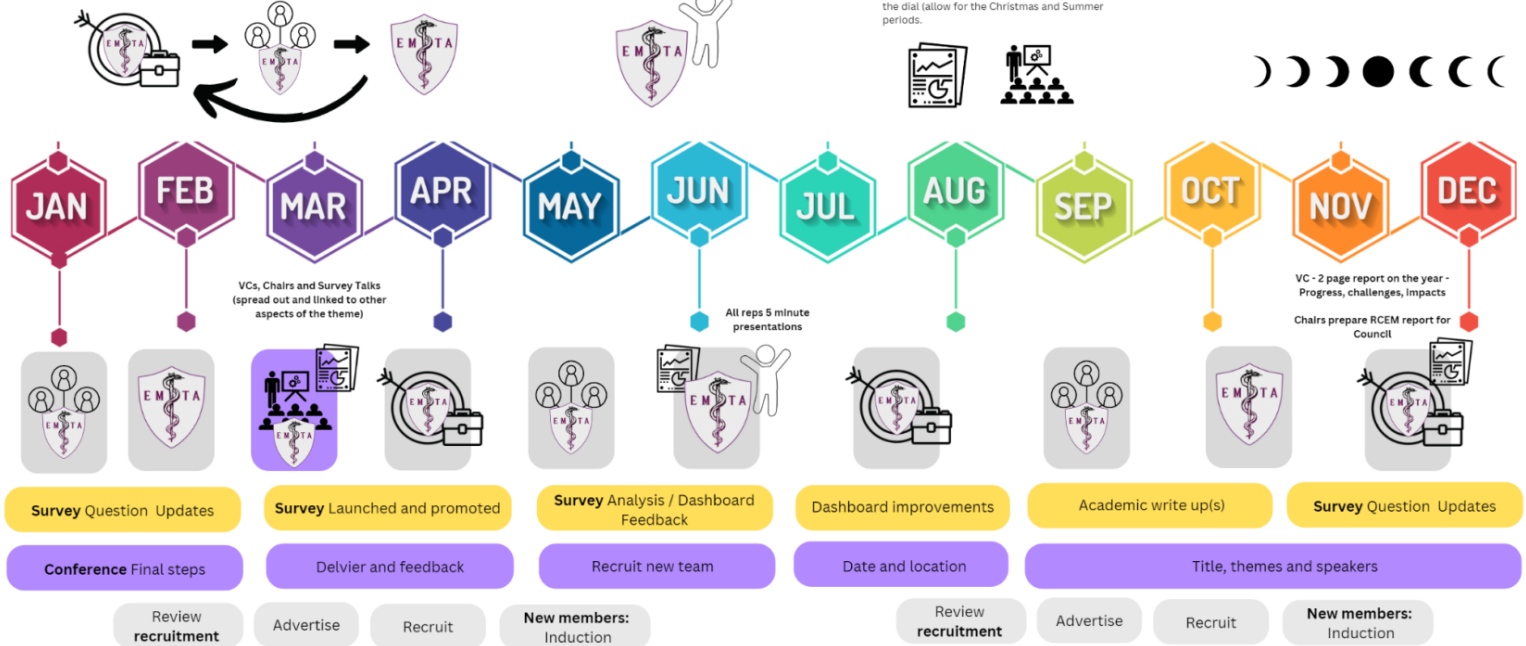
**Push and pull of "discuss then do"**

- The year end/start is a time to evaluate and plan
- The conference a time to report to the membership and be held more accountable to our programme of work
  - Plus chair election every other year
- The in-person meeting splits the year in half making a nature point to report progress. Tis and conference allow for 4 month periods of moving the dial (allow for the Christmas and Summer periods).

#### End of year cycle

**Review objectives set at the start of the year**

- Summarise progress against them
- Develop and bring emergent issues for the year ahead
- Consider what we what to report at conference
- Consider what the Survey might need to support your policy advocacy



- Members must attend minimum 2/3 of meetings
- Recording activity will be encouraged and mapping work to impacts to support group legitimacy
- Annualised reports will be made by the Chair(s) to Council, and the Executive members to the Association.
- The Executive will report to the membership via the conference on matters important to RDiTs for greater accountability.
- Clear handover processes between role-holders
- Mechanism for votes of no confidence (requiring simple majority, resulting in immediate resignation if passed)

## 5. Meetings

### 5.1 Meeting Frequency

- Minimum three formal strategic meetings of the entire committee. For 3-4 hours.
  - One meeting must be in-person inclusive of training and be a whole day.
- One EMTA conference
- Each Vice Chair Cluster is expected to meet a minimum of twice a year, ideally three times. For 60-120 minutes.
- The EMTA Executive will aim to meet a minimum of twice a year, ideally three times. For 60-120 minutes.

### 5.2 Meeting functions

- Vice Chair Clusters are designed to provide smaller forums for more focused discussion with peers in similar roles. Here topics will be identified for escalation to the broader group or for policy position ratification
- The EMTA executive are to meet to promote cross-silo cooperation and greater collaboration to achieve objectives
- The formal strategic meetings of the entire committee aim to agree on group strategy and priority areas. As well as discuss topics escalated or identified as interest to the RDIT membership for a representative voice and position to be formed.

## **6. Quorum and Voting for EMTA Committee**

Most decisions will be reached by consensus agreement. The EMTA Chair(s) will call for a vote by a show of hands or secret ballot at their discretion. A secret ballot may be requested by any member present in the meeting.

The quorum is one-third of the EMTA Committee Members (whether present in the meeting or not), one of the EMTA Chair(s), plus two individuals who hold roles on the EMTA Executive. A minimum of 10 is required. For the policy disagreement communication escalation policy outlined in the memorandum of understanding, this requirement is increased to two-thirds.

In the event of a tie the EMTA Chair(s) has the casting vote which may be used at their discretion.

In the absence of the Chair(s) and where the vote cannot be deferred to another date, a deputy nominated from amongst the Committee members, usually the Secretary or VC for Education, shall act as the Chair(s) for the purposes of voting.

**Votes of no confidence:** A vote of no confidence may be called with the support of 2 other members of the committee. This vote may be held for anyone in any role. A simple majority is all that is required to pass. Those who are undergoing the vote of no confidence are not included in that ballot. You must hold the confidence of a minimum of half of your peers to continue. If a person does not hold that confidence, they must resign. An explanation of the vote must then be provided to the VP for Membership and CEO

## **7. RCEM Commitments**

The College commits to:

- Provide staff support within resource constraints to facilitate meeting administration Support use of professional leave for EMTA duties
- Ensure RDiT representation requests go through EMTA
- Regular meetings between EMTA Chair(s), Executives and College leadership Administrative support for recruitment and governance

In the event of a significant disagreement in policy or action between EMTA and the College we will defer to the Memorandum of Understanding. This will detail how to manage conflict and maintain candour with the membership. Ultimately, the Board of Trustees is the main arbiter if an agreement cannot be made on how to proceed between the RCEM Executive and Communication Director.

## **8. Recognition**

The Association and College will develop mechanisms to:

- Record and recognise committee member activities and impacts
- Support professional leave at local level
- Provide evidence of contribution for members' portfolios as well as time for Education Development Time records.

## **9. Changes to Terms of Reference**

Modifications must be approved by RCEM Council based on proposals from EMTA Committee and RCEM Executive/Board. Remaining mindful of maintaining the appropriate balance between Association independence to protect our reputation with RDiTs whilst aligning with College objectives and Governance.

## Forum for EM Specialty And Specialist Doctors (EMSAS)

EMSAS is constituted under the ordinances. It forms part of the membership cluster, with the Responsible Officer being the Vice President Membership. The committee shall have the following terms of reference.

### Remit

To provide a focus for emergency medicine doctors who are not in substantive consultant or training posts in the UK

To encourage active involvement of all doctors in the afore mentioned group to shape the development of Emergency Medicine as a speciality and improve their own educational/training experience

To provide a structure for EMSAS doctors to influence College policy and highlight issues specific to them, and to represent their views on Council and RCEM Committees.

### Membership

All emergency medicine doctors who are not in substantive consultant or training posts have previously been considered as members of EMSAS.

The composition of the EMSA Executive shall be:

Chair: usually also the RCEM Council representative

Immediate Past Chair or Vice Chair

Secretary

Treasurer

Academy of Medical Royal Colleges representative

Training Standards Committee representative

EMSAS Conference Lead

One of the College Officers may choose to attend Executive meetings

The EMSASEMSAS committee shall include all members of the Executive and any other representatives to RCEM committees or task and finish groups.

Quoracy for the Executive meeting shall be four of the seven EMSAS representatives. Quoracy for the committee shall be four of the seven trainee EMSA members plus at least three other representatives

EMSAS shall maintain a Regional Representatives Group, a network of regional representatives across all regional boards, to facilitate awareness of any regional issues. This will also include representatives on the national boards.

Appointments of the role of Vice Chair are made through a process of nomination and selection which is undertaken by the EMSAS Executive. The Executive may appoint two Co-Vice Chairs to jointly fulfil this role. Vice Chair(s) shall be a Speciality doctor, Specialist or associate specialist doctor working in Emergency Medicine who is/are a Member of the Royal College of Emergency Medicine who in the opinion of the Executive Committee can fulfil the role profile and meet the person specification for the role.

The Chair or Co-Chairs shall be a Speciality doctor, Specialist or associate specialist doctor working in Emergency Medicine who is/are a Member of the Royal College of Emergency Medicine and who have sat on the EMSAS committee during the last 3 years. EMSAS Executive may create a Co-Chair role to allow two people to share the Chairing of the Forum. The appointment of the Chair or Co-Chairs shall be made by ballot of EMSAS members unless there is only one nomination for Chair or two nominations for Co-Chair, in which case the appointment may be confirmed by the EMSAS Executive. In the event of a ballot, this process will be handled by an employee as determined by the CEO of RCEM.

A Vice Chair may temporarily assume the Chair of EMSAS for a maximum of 12 months, in the event that the sitting Chair is temporarily unable to continue with their duties as Chair.

THE ROYAL COLLEGE OF EMERGENCY MEDICINE  
TERMS OF REFERENCE RULES

**Responsibilities**

Ensure the views of EMSASEMSAS doctors are represented within the Royal College of Emergency Medicine and to ensure two-way communication between them and the College.

Ensure the views of EMSAS doctors are represented outwards, and to other linked organisations

Provide advice to, and nominate representatives to, the Royal College and its committees upon invitation.

Provide information and support for EMSAS doctors and EMSAS-related issues to members

Promote research and academic achievement by emergency medicine

Provide regular contributions to the EMJ supplement to update EMSAS doctors on current issues

Appoint a Conference Lead for the EMSAS Annual Conference, responsible for design and approval of the programme, to liaise with the Events Team Manager who will arrange for the logistical activities to be provided by the Events Team.

In all activity manage reputational risk to the College and seek to ensure that there is alignment with relevant College strategy, policy and action

Manage EMSAS budget within the College standing financial instructions

Advise Council on any changes suggested to the TOR of the committee

Keep minutes of Executive, Committee and other meetings which should be circulated to the Vice President Membership, Dean, and CEO. Ensure minutes of outside bodies on which EMSAS is represented (e.g. Academy of Royal Colleges) are circulated to the relevant Responsible Officer

**Meetings:** These would normally be held at the EMSAS Spring meeting and during the EMSAS annual conference in order to minimise costs. Additional meetings may be called in exceptional circumstances and the use of teleconference will be considered.



## Gender Equity Committee

### Remit and Objectives

This Committee will make recommendations to Council in order to develop a College strategy to support women in emergency medicine including covering the following:

- Increase awareness about gender issues in medicine.
- Access resources to fuel discussion about gender topics.
- Foster and facilitate a culture of open communication about gender-specific issues.
- Construct solutions to emphasize the positive and mitigate the negative consequences of gender bias.
- Develop strategies to promote wellness, career sustainment, and career progression.
- Ensuring that the College takes into account the experience of all genders in its activities.
- Contributing to the development of College policies.
- Contributing to development and delivery of CPD events as requested.
- Responding to requests for comments from Council, its Boards and Committees.
- Highlighting the work of the College whilst safeguarding the College's reputation.

To fulfil this remit, the Chair will liaise with the Vice-President Membership, President and Chief Executive of the College to determine how best to utilise the skills and experience of the members. This may include involvement in College projects and Committee work on an issue-by-issue basis.

### Membership

The Committee membership is as follows:

- A Vice President of the College
- Committee Chair
- Member
- Fellow
- EMTA rep
- EMSAS rep
- ACP Forum rep
- Lay member
- Director of Education
- Membership will also include up to 5 appointed members

## LAY ADVISORY GROUP

Remit of the Lay Advisory Group

### Objectives

The Council has established the Lay Advisory Group (LAG) to provide advice from a lay perspective on the standards of care and training in Emergency Medicine.

### Constitution

The LAG has an advisory role and reports to the Council. The LAG remit covers the following:

- Highlighting areas of patient and carer concern to the Royal College and Council and advise on appropriate action
- Ensuring that the Royal College takes into account the patient, carer and public perspective in all appropriate activities.
- Being a resource for the Royal College to enable the delivery of a professional service that meets the needs and aspirations of patients, carers and the public.
- Developing patient, carer and public involvement in Royal College activities
- Developing patient information and education in Emergency Medicine
- Contributing to the development of Royal College policies
- Ensuring that decisions are made according to the Royal College's role in protecting the public interest, and in promoting high professional standards
- Responding to requests for comments from Council, its Boards and Committees
- Highlighting the work of the Royal College whilst safeguarding the Royal College's reputation.

To fulfil this remit the Chair of the Lay Group will liaise with the President and Chief Executive of the Royal College to determine how best to utilise the skills and experience of the lay members, having regard for their time available and budgetary constraints. This may include involvement in Royal College projects and Committee work on an issue by issue basis, as well as sitting on some Royal College Committees.

### Appointment process

The Chair of the LAG will consider liaising with the Nominations and Appointments Committee (NomCom) to facilitate appointments to the LAG.

### Membership

The composition of the Lay Advisory Group shall be determined by the Royal College Council. There shall be a minimum of six and a maximum of 25 members of the Lay Advisory Group, to include those Lay people appointed to sit on Regional and National Boards. Any member of Council may attend meetings of the Lay Advisory Group as an ex-officio member.

The term of office for the Members will be three years subject to a maximum service of two terms of office.

There shall normally be four meetings per year normally held at the Royal College's offices. All members of the Committee shall be advised of the business to be transacted at any meeting even if they are unable to be present.

### Chair

The Lay Group shall nominate and make recommendations to Council to appoint a Chair from amongst its numbers. The term of office for the Chair will be for three years.

The Chair is a member of the Council and will report to the Council. If the Chair is unable to attend a meeting of Council, the Chair will nominate a deputy from the Lay Advisory Group to attend.

In the absence of the chair a nominated deputy is to chair the meeting.

## QUALITY CLUSTER

### Clinical Leadership & Service Design Committee

This Clinical Leadership and Service Design Committee reports directly to Council and sits in the Quality Cluster of College Committees. It has the following terms of reference.

#### Remit

The Clinical Leadership and Service Design Committee, situated within the Quality Cluster of Committees, plays a pivotal role in advising the College on Clinical Leadership and Emergency Department Service Design and Delivery. The committee aims to collaborate with other relevant College Committees and formulate College guidance on these subjects for broader dissemination and Council approval. The remit includes:

- Emergency Department Workforce Planning and Management: Providing expert advice around the workforce, including Consultants, SAS doctors and post graduate doctors in training, Advanced Clinical Practitioners, Physicians Associates, and nurses. This encompasses, for example, job planning, job design, team design, rota design, defining competence and capability requirements, people development, recruitment, and retention. Issues around sustainable working will be picked up by, or with, the Sustainable Working Practices Committee.
- Emergency Department Design: Developing recommendations and offering expertise to optimise the physical design, equipment requirements, and functionality of Emergency Departments.
- Service Design and Delivery: Evaluating and enhancing processes within Emergency Departments, aiming to deliver quality standards throughout the patient journey through the Emergency Department. This will include interfaces with other specialties
- Emergency Medicine System Design and Integration: Contributing to the enhancement of the wider Urgent and Emergency Care System through strategic planning of the emergency medicine service and provision of practical guidance, acknowledging regional variations in service provisions.

The committee's output will be geared towards our membership and those involved in designing, commissioning, leading and delivering emergency medicine systems, at strategic, operational and tactical levels.

#### Membership

To include no more than 14 people in total:

- Chair: RCEM Fellow
- Vice President
- Experienced clinical leaders with relevant expertise drawn from across the UK and Northern Ireland
- Nursing representative
- ACP representative (nominated by ACP Forum)
- Trainee representative (nominated by EMTA)
- SAS representative (nominated by EMSAS)
- Lay representative

The committee may co-opt other members as required subject to budget

#### Meetings

The Committee intends to meet three-four times a year normally by video conference call, although face to face meetings will be convened maximally once a year, if required

#### Individual responsibilities

## THE ROYAL COLLEGE OF EMERGENCY MEDICINE

### TERMS OF REFERENCE RULES

Individuals who are appointed to the committee have a personal responsibility. They will be expected to be an ambassador for the service design and configuration work of the Royal College, supporting, explaining and reinforcing the Royal College strategy.

Fellows and members may apply to be a member of the committee.

## **Emergency Preparedness, Resilience and Response (EPRR) PAG**

This Emergency Preparedness, Resilience and Response Professional Advisory Group (EPRR PAG) reports to the Quality In Emergency Care Committee and sits in the Quality Cluster. It has the following terms of reference.

### **Remit**

To provide expert advice to the College on EPRR and:

- a) To prepare specialty input for Council approval on the development of national EPRR guidance being developed by NHSE, UKHSE or other national bodies for use by EDs including for major incidents; CBRNE (Chemical, Biological, Radiological, Nuclear, and high yield Explosives) incidents and other EPRR specialist incidents.
- b) Create, implement and maintain a system to link Emergency Department EPRR leads (multi-professional group) to share information as early as possible and to include links to National Ambulance Resilience Unit (NARU) and NHS bodies.

### **Membership**

To include:

- Chair: RCEM Fellow (who will also be our representative at the NHSE EPRR Clinical Reference Group)
- Major Trauma Centre TC representative and District General Hospital representative (to include both large and small Emergency Departments)
- One member nominated by each of the national boards for Northern Ireland, Scotland and Wales
- Pre Hospital EM PAG representative
- Paediatric EM PAG representative
- Military representatives (1 Fellow and 1 trainee)
- Academic EPRR representative
- ED EPRR Lead Nurse representative
- NARU Medical lead
- Other individuals with specific expertise can be co-opted onto the PAG subject to budget and if there is interest from ACPs, Trainees and EMSAS clinicians one seat each is available for each.
- NHSE EPRR representative to have a standing invitation to join the PAG in an advisory non-voting capacity.

### **Meetings:**

The group intends to meet quarterly by video conference call or more often when appropriate.

### **Environmental Special Interest Group**

The Environmental SIG is a sub-committee of and reports to the Service Design & Delivery Committee. It has the following terms of reference.

#### **Remit**

Devise an environmental policy and work programme for the specialty for approval by the Executive Committee focussed on reducing the environmental impact of the specialty of emergency medicine.

To advise the CEO on environmental performance and progress to achieve net-zero goals.

#### **Membership**

The first Chair will be appointed by a process of and interview as described in the standing instructions governing Committees of this College. With up to 10 other members appointed or co-opted as required, subject to budget constraints. To have other members from College Committees such as EMTA, EMSAS, Lay Group as required.

#### **Meetings**

To reduce its environmental impact the SIG shall meet by email or telephone conference when appropriate, subject to budget constraints.

## Environmental Special Interest Group: GreenED Subcommittee

The *GreenED Subcommittee* reports to the Environmental Special Interest Group (ESIG).

It has the following terms of reference.

### Remit

To develop and deliver, subject to the approval of the ESIG, the concept of the 'Green ED' so that it can be rolled out initially across UK emergency departments, this includes:

Reviewing the progress of the *GreenED* pilot sites and using this to develop a body of knowledge that can be moulded into a *GreenED* product

- Implementing the pilot sites
- Creating and delivering the *GreenED* product (framework and associated tools/materials)
- Identifying opportunities to develop the wider engagement of the specialty in the *GreenED* concept
- Marketing the *GreenED* product once created
- Devise and seek budget to develop the project
- Identify any fundraising or collaboration opportunities to support the project

### Membership

To include:

ESIG members:

The membership will comprise 10-12 (number of) members from ESIG who shall be:

- The WG Chair
- ESIG Chair
- ESIG Vice- Chair
- One other member
- RCEM CEO or nominated deputy
- ACP representative
- Pilot site leads (up to 3)
- Up to 2x (number of) other co-opted members

The founding ESIG members shall be: James Chan, Lindsay Merry, Gordon Miles (CEO), Sandy Robertson (ESIG chair), Tim Spruell (ESIG vice-chair), Zoe Steley (GreenED SC chair and Royal Free pilot site lead), Hannah Webb (Brighton pilot site lead), name of EMTA, ACP Forum and EMSAS reps.

Representatives from other pilot sites: as appointed

**Meetings:** The group shall meet by telephone or video conference when appropriate.

### Same Day Emergency Care Special Interest Group

This Group is a Sub-Committee of the Service Design & Delivery Committee and has the following terms of reference.

#### Remit

Devise a strategy and work programme for approval by Council focussed on improving same day emergency care.

#### Membership

Chair by appointment

In the absence of the chair a nominated deputy is to chair the meeting. 3 years from the first meeting.

Members (4-12) by appointment:

To include consultant representation will be sought from the English regions, Wales, Northern Ireland, Republic of Ireland and Scotland.

Trainee representative (nominated by EMTA)

SAS representative (nominated by EMSAS)

Lay representative (nominated by LAG) 3 years

ACP representative

Administrator (Ex-Officio) The Administrator is an ex-officio member and must attend the meeting to record the minutes. The Administrator will not have any voting rights.

**Meetings:** it shall meet by in person or telephone conference when appropriate subject to budget constraints.



## Quality In Emergency Care Committee

The Quality In Emergency Care Committee shall have the following terms of reference:

### Remit

To develop and review guidelines for the specialty of emergency medicine

To develop Consensus Based Best Practice Statements for the speciality of Emergency Medicine

To set and monitor standards of Clinical Care, Best Practice and Clinical Procedures in Emergency Departments

To produce quality improvement tools for Emergency Departments that will encourage uniform data collection and enable QIPs to be conducted in a systematic way

To develop and disseminate patient safety strategies for the speciality of Emergency Medicine

To develop and maintain the Quality section of the Royal College website

To consider requests for RCEM endorsement from other organisations

To consider requests regarding surveys of the membership from other organisations, along with the Research Committee

To liaise with other organisations (including other medical royal colleges) regarding issues relevant to the practise of emergency medicine.

### Membership

At present Membership of this Committee comprises:

Chair or two Co-Chairs, who is/are elected by the members of the QEC and appointed by the Royal College Council. They will have been a consultant for 5 years and a member of the committee for 2 years prior to appointment.

The Chair will sit on the Royal College Council and Executive Committee (where they will share one vote) and be an ex-officio member of the Service Design & Delivery Committee. Chairs of Subcommittees. Subcommittee chairs will be a current consultant. Applications will be invited by the Royal College of Emergency Medicine, and the most suitable applicant will be recommended by the QEC and appointed by the Royal College Council

1 representative of doctors in training, selected by the Emergency Medicine Trainees Association

1 representative of SAS doctors, selected by EMSAS

1 or 2 representatives of the non-medical professions relevant to emergency care, co-opted representatives

Up to 36 co-opted members Co-opted and selected for the specific expertise they bring to the committee. Broad regional representation will be sought wherever possible.

1 lay representative, selected by LAG

Administrator Quality Manager, or deputy nominated by Quality Manager

### Meetings

The Chairs of the Sub-Committees will give verbal and written reports of the activities of their subcommittees at meetings.

The Committee will meet 4 times each year. Two of the annual meetings will be “full” meetings, to which all members of the Committee and Subcommittees are invited. These also provide an opportunity for the Subcommittees to meet in person. The other two meetings will be business meetings of the main Committee and Subcommittee Chairs only. Other business will be conducted by teleconferencing and e-mail.

## Best Practice Sub-Committee

The Best Practice Sub-Committee of the Quality In Emergency Care Committee. It shall have the following terms of reference:

### Remit

To develop consensus based best practice statements and guidance for the speciality of Emergency Medicine

To advise the NHS, DOH, CQC, the Royal Colleges and other national bodies who have an interest in best clinical practice in Emergency Departments.

To develop and maintain the RCEM Guidance section of the Royal College website

### Membership

Chair who is appointed and will be a current consultant in emergency medicine with a demonstrable interest in the identification and application of best clinical practice. Applications will be invited by the Royal College of Emergency Medicine, and the most suitable applicant will be recommended by the QEC and appointed by the Royal College Council. The term of office will be 3 years, which is renewable for a further 3 years at the discretion of the QEC.

4 – 10 co-opted members who have specific expertise to bring to the committee. These co-opted members may include doctors in training, nursing or other representatives, as well as consultants in Emergency Medicine 3 years, which is renewable for a further 3 years at the discretion of the QEC.

1 Lay representative, nominated by the Lay Advisory Group, renewable for 5 years at QEC discretion

6 SIG Chairs, who will have specific expertise in one each of the following areas of emergency medicine:

Toxicology

Older People in Emergency Medicine

Public Health Emergency Medicine

(3 years, which is renewable for a further 3 years at the discretion of the QEC).

Administrator, Quality Manager, or deputy nominated by Quality Manager, ex-officio

### Responsibilities

Chair of the Best Practice Subcommittee

Attend QEC meetings at least 3 times per year.

Chair subcommittee teleconferences, coordinate e-mail traffic or face-to-face meetings as necessary.

Co-ordinate the development of Best Practice Statements and guidance for the speciality.

Provide verbal and written reports to QEC

Regular communication with Chair of QEC and QEC administrator.

Liaise with other bodies with specific expertise in best clinical practice.

Co-opted members

Work with the subcommittee to produce Best Practice Statements for the speciality.

Attend at least one full QEC meeting per year.

Participate in one or more face-to-face meetings of the subcommittee per year.

## Older People in Emergency Medicine SIG

The Older People in Emergency Medicine SIG reports to the Best Practice Sub-Committee. It has the following terms of reference.

### Remit

Devise a strategy and work programme for approval by the Best Practice Sub-Committee focussed on improving the care for older people and frail patients presenting at the Emergency Department.

### Membership

The Chair will be nominated by the QEC Chair or Exec, with up to 8 other members co-opted as required, subject to budget constraints.

The term of office will be three years initially, extendable for a further two years at the discretion of the QEC Chair.

### Meetings

The SIG shall meet by email or telephone conference when appropriate, subject to budget constraints.

## Public Health EM SIG

The Public Health EM SIG reports to the Best Practice Sub-Committee. It has the following terms of reference.

### Remit

Devise a strategy and work programme for approval by the Best Practice Sub-Committee focussed on improving public health.

### Membership

The Chair will be nominated by the QEC Chair or Exec, with up to 8 other members co-opted as required, subject to budget constraints.

The term of office will be three years, extendable for a further term at the discretion of the QEC Chair.

### Meetings

The SIG shall meet by email or videoconference when appropriate, subject to budget constraints.

## Toxicology SIG

The Toxicology SIG reports to the Best Practice Sub-Committee. It has the following terms of reference.

### Remit

Devise a strategy and work programme for approval by the Best Practice Sub-Committee focussed on improving the care for toxicology patients presenting at the Emergency Department.

### Membership

The Chair will be nominated by the QEC Chair or Exec, with up to 8 other members co-opted as required, subject to budget constraints.

The term of office will be three years initially, extendable for a further three years at the discretion of the QEC Chair.

### Meetings

The SIG shall meet by email or telephone conference when appropriate, subject to budget constraints.

## Mental Health Sub Committee

The Mental Health Sub Committee reports to the Quality In Emergency Care Committee. It has the following terms of reference.

### Remit

Devise a strategy and work programme for approval by the Quality in Emergency Care Committee focussed on improving the care for mental health patients presenting at the Emergency Department.

Provide advice to other national organisations and statutory bodies with regards policy development in relation to mental health patients and the Emergency Department.

### Membership

The Chair will be nominated by the QEC Chair or Exec, with up to 8 other members co-opted as required, subject to budget constraints.

The term of office will be three years initially, extendable for a further two years at the discretion of the QEC Chair.

### Meetings

The Sub Committee shall meet by email or telephone conference when appropriate, subject to budget constraints.

## Paediatric Emergency Medicine Professional Advisory Group

The purpose of a Professional Advisory Group (PAG) for the care of children in EDs is to help co-ordinate College business and to be a resource for College and its members.

There has historically been a firm commitment by the College to improve provision of services for children, and to train emergency medicine doctors to look after children, which form around 25% of ED attendances. Consultants may train further in Paediatric Emergency Medicine (PEM), which is a route recognised by the GMC for subspecialty training 16 years ago (for both EM and Paediatric CCT-holders). However, most of the PEM care nationally is undertaken by generically trained EM clinicians in Emergency departments seeing patients of all ages.

### Remit

To ensure that children's interests are represented within all relevant aspects of College structure / business, and that PEM is recognised and developed as both a sub-speciality, but also a normal part of practice in most emergency departments.

To provide advice and support on all aspects of paediatric emergency care (at both core and specialist levels of clinical practice) to the College and its members. To help facilitate internal and external requests for representation on matters or documents relating to paediatric emergency care, ensuring that the College membership is fairly represented and is engaged.

### Membership

The composition of the Paediatric Medicine Professional Advisory group shall be:

Chair by appointment (with a 3 year term)

Deputy Chair (to be selected from other Committee members listed below)

2 RCEM members or fellows of whom at least one must practice in general (i.e. nontertiary) emergency departments.

Training Standards Committee PEM Lead

QEC PEM Lead

Curriculum Committee PEM Lead

RCPCH PEM representative

RCEM Representative on the Intercollegiate Committee for Emergency Services to Children (may be combined with another role)

An EMTA representative may be appointed but it is not considered essential

## THE ROYAL COLLEGE OF EMERGENCY MEDICINE

### TERMS OF REFERENCE RULES

A Lay Member may be appointed from the RCEM Lay Group  
A college Vice President

Additional Members may be co-opted subject to budget and the approval of the Chair

Where possible the membership should also aim to ensure that there is good regional representation from across the UK. Membership will be opened for expressions of interest against an agreed person specification.

#### **Responsibilities of the Chair:**

To deliver the responsibilities of the PAG within the Terms Of Reference, and to ensure that the interests of paediatric patients and members with paediatric expertise are represented. The Chair shall ensure fairness in recruitment to the committee, and that College policy is represented. The Chair shall be a Vice President of the College

#### **Responsibilities of the PAG**

This group will provide an expert review panel to provide support on any area related to paediatric emergency medicine. The list below is designed to consider the most common areas, but it not intended to be exhaustive:

1. Ad hoc requests for comments on documents or representation at events / meetings.
2. Requests for a PEM representative from RCEM to work on specific time-limited projects (e.g. intercollegiate, other Colleges, NHS government projects) or on specific documents / guidelines (e.g. NICE guidelines etc).
3. Support relevant RCEM Committees on training, curriculum and exams (both for EM training and sub-speciality PEM training) when requested, and facilitate the production of training resources, including RCEM Learning
4. Service design and delivery including workforce issues
5. Supporting requests for PEM expertise for ISRs (where PEM-related concerns have been raised).
6. Events and study days
7. Over-arching strategy and policy documents relating to paediatric emergency care. This will include scanning proposed documents to ensure that PEM-specific issues have been considered
8. Encouragement of EM trainees to gain sub-speciality PEM training
9. To ensure that PEM information on the RCEM website is adequate and up to date.
10. To examine cross-representation and to strengthen links with the RCPCH.
11. To ensure that PEM develops both as a sub-speciality in centres of excellence, but also as part of day to day practice in non-specialised EDs

**Meetings:** Formal Quarterly virtual meetings with ad hoc additional meetings as required. One of the quarterly meetings per annum should be face to face.

PAG will sit within the Quality In Emergency Care Cluster of the RCEM Committee Structure but it is recognised its remit is wider than Quality in Emergency Care.

## Pre-Hospital Emergency Medicine Professional Advisory Group

The purpose of a Professional Advisory Group (PAG) for pre-hospital emergency medicine is to help co-ordinate College business and to be a resource for College and its members. It reports to Quality In Emergency Care Committee.

PHEM is an important sub-speciality within Emergency medicine and the provision of training and the curriculum for PHEM is in the hands of the Intercollegiate Board for Training In Pre Hospital Emergency Medicine. This collaborative arrangement involving a number of Colleges and Faculties is showing signs of stress as its budget commitment is causing some other Colleges to step back from their funding commitment. As PHEM is important to Emergency Medicine this College wishes to establish a Professional Advisory Group so that we can apply more leadership to the PHEM agenda.

### Remit

To ensure that pre-hospital emergency medicine interests are represented within all relevant aspects of College structure / business, and that PHEM continues to be recognised and developed as a sub-speciality.

To provide advice and support on all aspects of pre-hospital emergency care to the College and its members. To help facilitate internal and external requests for representation on matters or documents relating to pre-hospital emergency care, ensuring that the College membership is fairly represented and is engaged.

PHEM will sit within the Quality Cluster of the RCEM Committee Structure

### Membership

The composition of the Pre-hospital Emergency Medicine Professional Advisory group shall be:

Chair

Deputy Chair (to be selected from other Committee members listed below)

2 RCEM members or fellows

Training Standards Committee PHEM Lead

Curriculum Committee PHEM Lead

An EMTA representative may be appointed but it is not considered essential

A Lay Member may be appointed from the RCEM Lay Group

A College Vice President

A military representative may be appointed

The group should seek to include members with backgrounds in the ambulance service, HEMS, and BASICS to represent the spectrum of activity that goes on. Additional Members may be co-opted subject to budget and the approval of the Chair

Where possible the membership should ensure regional representation from across the UK.

Membership will be opened up for expressions of interest against an agreed person specification.

### Responsibilities of the Chair:

To deliver the responsibilities of the PAG within the Terms Of Reference, and to ensure that the interests of pre-hospital patients and members with pre-hospital expertise are represented. The Chair shall ensure fairness in recruitment to the committee, and that College policy is represented.

### Responsibilities of the PAG

This group will provide an expert review panel to provide support on any area related to paediatric emergency medicine. The list below is designed to consider the most common areas, but it not intended to be exhaustive:

1. Develop our strategy to the Intercollegiate Board for Training In Pre-Hospital Emergency Medicine.
2. Ad hoc requests for comments on documents or representation at events /

## THE ROYAL COLLEGE OF EMERGENCY MEDICINE

### TERMS OF REFERENCE RULES

meetings.

3. Requests for a PHEM representative from RCEM to work on specific time-limited projects (e.g. intercollegiate, other Colleges, NHS government projects) or on specific documents / guidelines (e.g. NICE guidelines etc).

4. Support relevant RCEM Committees on training, curriculum and exams (both for EM training and sub-speciality PHEM training) when requested, and

facilitate the production of training resources, including RCEM Learning

5. Service design and delivery including workforce issues

6. Events and study days

7. Over-arching strategy and policy documents relating to pre-hospital emergency care. This will include scanning relevant proposed documents to ensure that PHEM-specific issues have been considered

8. Encouragement of EM trainees to gain sub-speciality PHEM training

9. To ensure that PHEM information on the RCEM website is adequate and up to date.

**Meetings:** Formal Quarterly virtual meetings with ad hoc additional meetings as required. One of the quarterly meetings per annum should be face to face.

## Quality Assurance & Improvement Sub-Committee

The Quality Assurance & Improvement Sub-Committee of the Quality In Emergency Care Committee. It shall have the following terms of reference:

### Remit

To develop clinical standards and Quality Improvement Programme (QIP) tools for measuring and improving the quality of care delivered by the speciality of Emergency Medicine

To run the national audit programme of the Royal College and send out reports of the individual and comparative results to participating departments

Develop the national quality improvement programme of the Royal College

To advise the NHS, NICE, DOH, CQC, the Royal Colleges and other national bodies who have an interest in the quality of care in Emergency Departments.

To develop and maintain the RCEM Standards, Clinical Audit, and Quality Improvement sections of the Royal College website

### Membership

Chair or co-chairs, at least one of whom will be a current Consultant in Emergency Medicine with a demonstrable interest and expertise in quality improvement and clinical audit. Applications will be invited by the Royal College, and the most suitable applicant will be recommended by the QEC and appointed by the Royal College Council.

4 – 10 co-opted members, who have specific expertise to bring to the committee. These co-opted members may include doctors in training, nursing or other representatives, as well as Consultants in Emergency Medicine. Applications will be invited by the Royal College and selected by the Chair in discussion with the QEC.

1 Lay representative who is nominated by the Lay Advisory Group

Topic team members, working specifically to design, run and report each QIP topic.

Administrator, Quality Manager, or deputy nominated by Quality Manager ex-officio

### Responsibilities

Chair of the Standards Subcommittee

- i) Attend QEC meetings at least 3 times per year.
- ii) Chair subcommittee teleconferences, coordinate e-mail traffic or face-to-face meetings as necessary.
- iii) Co-ordinate the development of clinical standards and audit tools for the speciality.
- iv) Supervise the national audit programme
- v) Provide verbal and written reports to QEC.
- vi) Regular communication with Chair of QEC and QEC administrator.
- vii) Liaise with DOH, HCC and other relevant Royal Colleges.

### Co-opted members

- i) Work with the subcommittee to develop auditable standards.
- ii) Help develop and test the audit tools
- iii) Work with the subcommittee to improve the quality of care in Emergency Departments.
- iv) Attend at least one full QEC meeting per year.
- v) Participate in 2 or more teleconferences or face-to-face meetings of the subcommittee per year.



## Safer Care Sub-Committee

The Safer Care Sub-Committee of the Quality In Emergency Care Committee. It shall have the following terms of reference:

### Remit

To develop and disseminate patient safety and risk management strategies for the speciality of Emergency Medicine

To monitor and act upon NRLS safety incident data related to emergency medicine

to maintain a database of Safety Leads in all Emergency Departments

To commission and support research in conjunction with the Research Committee in the field of safety in the emergency department

To advise the NHS, DOH, CQC, the Royal Colleges and other national bodies who have an interest in risk management and patient safety in Emergency Departments

To ensure members are informed in a timely manner of key publications and resources for patient safety

To develop and maintain the Safety section of the Royal College website

### Membership

Chair who will be a current consultant in emergency medicine with a demonstrable interest in patient safety and risk management. Applications will be invited by the Royal College of Emergency Medicine, and the most suitable applicant will be recommended by the QEC and appointed by the Royal College Council.

4 – 10 co-opted members, who have specific expertise to bring to the Committee. These co-opted members may include doctors in training, nursing or other representatives, as well as consultants in Emergency Medicine

1 Lay representative who is nominated by the Lay Advisory Group

Administrator, Quality Manager, or deputy nominated by Quality Manager are ex-officio members

### Responsibilities

Chair of the Safer Care Subcommittee

Attend QEC meetings at least 3 times per year.

Chair subcommittee teleconferences, coordinate e-mail traffic or face-to-face meetings as necessary.

Co-ordinate the development and dissemination of safety information for the speciality of Emergency Medicine.

Provide verbal and written reports to QEC.

Regular communication with Chair of QEC and QEC administrator.

Liaise with patient safety and other bodies as appropriate.

Co-opted members

Work with the subcommittee to improve Patient Safety in Emergency Departments.

Attend at least one full QEC meeting per year.

Participate in 2 or more teleconferences or face-to-face meetings of the subcommittee per year.

## Sustainable Working Practices Committee

This Committee has the following terms of reference.

### Remit

Devise a strategy and work programme for approval by Council focussed on improving sustainability of the working life of emergency physicians and improving the working conditions in the workforce in Emergency Medicine. Develop a strategy for assisting with revalidation and remediation.

### Membership

Chair by appointment

In the absence of the chair a nominated deputy is to chair the meeting.

Members (4-12) by appointment:

To include consultant representation will be sought from the English regions, Wales, Northern Ireland, Republic of Ireland and Scotland.

Nursing representative

Trainee representative (nominated by EMTA)

SAS representative (nominated by EMSAS)

Lay representative (nominated by LAG) 3 years

Administrator (Ex-Officio) The Administrator is an ex-officio member and must attend the meeting to record the minutes. The Administrator will not have any voting rights. On-Going

**Meetings:** it shall meet by in person or telephone conference when appropriate subject to budget constraints.