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## Clinical Trials Network Research Prioritisation Steering Committee

*An entity of the Research Advisory Committee*

### 1. Introduction

These terms of reference are established under, and are subordinate to, the Policy on College Entities (the Policy). Clinical Trials Network (CTN) Research Prioritisation Steering Committee (RPSC) members should ensure they are familiar with the provisions and requirements of the Policy:

These terms of reference include details of the following:

- membership specifications (including any variations to the Policy permitted by the Council of Advocacy, Practice and Partnerships (CAPP));
- matters specific to the CTN RPSC (i.e. role and responsibilities); and
- where relevant, any variation of conduct of meeting requirements (if permitted by CAPP).

Otherwise, reference should be made to the Policy for details of all matters pertaining to the operation of the Steering Committee.

### 2. Purpose and Scope

The purpose of the CTN RPSC is to provide expertise and direction to the conduct of an ACEM Clinical Trials Network research prioritisation exercise to identify the unanswered questions about emergency care from consumer and clinical perspectives in Australia and New Zealand and develop a list of top ten priorities for the next five years. The top ten priorities will to be used to inform:

- ACEM strategic priorities for research and advocacy;
- decision-making for ACEM and ACEM's Research Advisory Committee and research networks on what research projects to support;
- ACEM CTN members, as well as other ACEM member and trainee clinician researchers, of ACEM strategic research priorities for consideration in grant development;
- greater awareness of international and national grant schemes of the ACEM CTN research priorities.

### 3. Membership

The CTN RPSC consists of the following members:

- (a) Original project group members
  - Professor Viet Tran, Chair, Research Advisory Committee (TAS)
  - Dr Elyssia Bourke, Chair, Clinical Trials Network Executive (VIC)
  - Professor Diana Egerton-Warburton, Deputy Chair, Clinical Trials Network Executive (VIC)
  - Associate Professor Daniel Haustead, CAPP ex-officio member, Research Advisory Committee (SA)
  - Professor Daniel Fatovich, FACEM (WA)
  - Dr Peter Jones, FACEM (NZ)
  - Dr Thomas Shanahan, FACEM Trainee (VIC)
- (b) Up to one (a) additional trainee enrolled in the FACEM training program, appointed pursuant to College processes
- (c) One independent representative of the James Lind Alliance

- (d) Up to two representatives from the College of Emergency Nursing Australasia and/ or College of Emergency Nursing New Zealand
- (e) Up to five (5) external community members appointed by CAPP, one of whom who identifies as Aboriginal and/ or Torres Strait Islander and one who identifies as Māori, appointed in line with the Policy on the Appointment and Remuneration of Community Members (COR498).

The Steering Committee will have the ability to co-opt additional members with knowledge and/or expertise not already possessed by the ordinary members.

The following ACEM staff will attend and participate in meetings of the CTN RPSC, but do not have voting rights in relation to matters being considered by the CTN RPSC.

- Project Administrator
- Other ACEM staff shall attend as required.

### 3.1 Office Holders

The Co-Chairs will consist of a member elected from the membership of the Steering Committee for appointment by the Research Advisory Committee and the independent representative from the James Lind Alliance.

A Deputy Chair shall be elected from the membership of the Steering Committee. The Deputy Chair shall act in the place of the FACEM Chair during any temporary absence, including for any matter(s) where the chair may be absent due to a conflict of interest.

## 4. Responsibilities and Authority

### 4.1 Responsibilities

The responsibilities of the CTN RPSC will be to:

- Define the aims, objectives and scope of the CTN research prioritisation exercise.
- Publicise the prioritisation exercise within their organisation and networks and encourage participation in developing the research priorities.
- Develop the methodology for collecting, verifying and reviewing research priority submissions.
- Develop the interim priority setting questionnaire based on submissions received and reviewed.
- Collate the results of the interim priority setting questionnaire and produce an interim list of top 20-30 priorities to take to the final priority setting workshop.
- Support the conduct of the final priority setting exercise via a one-day workshop with all relevant clinician and consumer stakeholders to determine the final top ten priorities.
- Support the publication and promotion of the top 10 research priorities to emergency care policy makers, clinicians, and research funders.

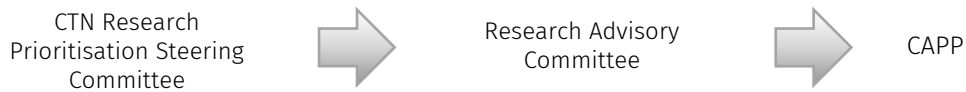
### 4.2 Extent of Authority

The CTN RPSC has delegated authority to make decisions where a routine process/procedure is present regarding the above matters. Where there is none, the CTN RPSC will make recommendations to the Research Advisory Committee and where required, through to CAPP. The CTN RPSC does not have authority to waive, vary or otherwise depart from:

- the above stated responsibilities;
- these Terms of Reference;
- the Policy;
- the terms or requirements of any approved College policy or regulation; and
- the requirements of ACEM's Constitution.

Matters requiring decisions outside of scheduled meetings will, at the discretion of the Chair, be determined by the Chair or by the whole CTN RPSC as required. Matters dealt with by the Chair will be tabled at the next meeting.

#### 4.3 Line of Reporting



#### 5. Meeting Requirements

The CTN RPSC will meet regularly and as required, by videoconference for the duration of the 2-year project. The Policy allows for variation of some of the meeting requirements, where this has been approved by the relevant governing body.

#### 6. Document review

Document authorisation: Council of Advocacy, Practice and Partnerships  
Document implementation: Research Advisory Committee  
Document maintenance: Department of Policy, Research and Partnerships

#### 7. Revision history