



RESEARCH and REGISTRIES COMMITTEE COMMISSION

MISSION:

There is a need for an evidence-based approach to improve systems of care and survival. ILCOR is in a leadership position to drive the international research agenda to identify and prioritize gaps in knowledge related to resuscitation and first aid practices. We have the opportunity to foster and facilitate international research collaboration with consensus operational definitions, registry data (national and international registries) for benchmarking, quality improvement, and research. Furthermore, it is essential that we measure and disseminate progress towards our vision of saving more lives through resuscitation.

In an effort to collect descriptive data on systems of care and outcomes following OHCA/IHCA, we are committed to advancing our research and registries mandate. This will involve continued development of consensus operational definitions and reporting templates, and collection of summary data on process of care and patient outcomes from registries around the world. Several challenges that we will need to address include integrity of the data, permission to access data from registries, data integration, and funding and regulatory challenges associated with holding or displaying data.

REPORTS TO: ILCOR Board

NUMBER OF MEMBERS:

Up to 15

APPOINTED MEMBERS:

- Chair (voting)
- Vice-Chair (voting)
- 10 At-large members (voting)
- 3 Support members (selected by chair) (voting)

Members must have content expertise in research or registries of out- or in-hospital cardiac arrests; all members are volunteers.

EX-OFFICIO MEMBERS:

- Board Liaison
- ILCOR Digital Communication and Social Media Lead or designee (non-voting, unless on committee as a member)
- AHA GWTG Staff who work on research and registries committee (non-voting)
- ILCOR Coordinator (non-voting)
- Advisor of Science & Health Advancement (non-voting)
- Immediate Past Chairman (non-voting)

METHOD OF APPOINTMENT:

Initial Chairperson and members will be appointed by the Board. Subsequent years will follow standard nominations process. Appointment will adhere to the ILCOR policy on appointment. Open positions for members, Chair and Vice Chair will be posted on the ILCOR website and applications will be accepted from all qualified candidates.

The ILCOR nominating committee will make recommendations to ILCOR Board for Members, Chair, and Vice-Chair position.

If all applicants are equally qualified the offer of an appointment will consider the following priorities in order:

1. Balance across ILCOR councils
2. Balance across genders
3. Diversity across career levels (early, mid, senior)

TERM OF OFFICE:

- Terms start July 1 and end June 30.
- The Chair and Vice-Chair are appointed for a 3-year term with eligibility for three additional 1-year terms.
- Members are appointed for a 2-year initial term with eligibility for three additional 1-year terms.
- Subsequently, all member terms will be staggered for 2, 3 or 4 years.
- Non-performance will be managed in accordance with ILCOR policy.

FREQUENCY OF MEETINGS:

Every three to four months virtually or as determined by the chair. Quarterly reports are provided to the board, and an annual report is to be shared at the annual ILCOR/GA meetings.

QUORUM FOR VOTE:

Greater than 50% of voting members comprise the quorum including either Chair or Vice Chair.

RESPONSIBILITIES & OBJECTIVES:

- Contribute to the collection of data from existing registries of both out- and in-hospital cardiac arrests throughout the world.
- Contribute to a description of the epidemiology and outcome of out- or in-hospital cardiac arrests across world by use of registry data.
- Communicate with ILCOR members on the process of data collection and utilization through research and registries, and/or improve the quality of research and registries, to improve survival from cardiac arrests with an evidence-based approach.
- Review/Approve annual report that describes out-of/in-hospital cardiac arrests across world.
- Synthesis of OHCA/IHCA registries worldwide.
- Increased international research collaborations
- Better understanding of existing epidemiology of OHCA/IHCA and associated trends
- Measure and report progress toward vision of saving more lives globally through resuscitation
- Discuss and suggest how to develop research and registries for out-of/in-hospital cardiac arrests across the world, with the aim of using an evidence-based approach to improve survival after cardiac arrest.
- Contribute to periodic publication.