

TRAUMA ADVISORY AND SYSTEM STAKEHOLDERS COMMITTEE
ORGANIZATIONAL GUIDELINES

I. ORGANIZATION

The Trauma Advisory and System Stakeholders Committee (TASSC) is a standing subcommittee of the Statewide Emergency Medical Services (EMS) Advisory Committee. TASSC is comprised of representatives from Regional Trauma Advisory Councils (ReTrAC), professional organizations, hospitals, Indian Health Services, rehabilitation, injury prevention advocates, health insurance industry, and other interested parties as specified below.

II. PURPOSE

TASSC is by statute a subcommittee of the EMS Advisory Committee, which functions in an advisory capacity to the EMS Bureau and Regional Trauma Advisory Councils. TASSC works in collaboration with the Regional Trauma Advisory Councils to maximize access for all people in New Mexico to optimal and timely trauma care in an effort to decrease human suffering and cost associated with morbidity and mortality due to trauma. TASSC will also work in collaboration with the EMS Bureau in promoting and maintaining a financially viable and effective trauma care system.

RESPONSIBILITIES

Specifically, the TASSC will participate as an advisory body in the following:

1. Issues affecting trauma care including but not limited to system development and improvements and medical audit;
2. Final recommendations on legislative amendments to the EMS statutes related to trauma and changes in the trauma regulations;

3. Recommendations and advocacy for trauma funding initiatives;
4. Review and final recommendations to the EMS Advisory Committee relating to the trauma budget;
5. Recommendation to the Bureau for approval of Regional Trauma Advisory Councils; and
6. Forum for review of issues submitted from Regional Trauma Advisory Councils and State Trauma Program.

MEMBERSHIP

Membership shall be a fair representation of urban and rural, geographically dispersed trauma care providers and interested parties. Nominations will be solicited from the following groups:

Classification	Representative Groups
1. Trauma surgeon (urban), trauma surgeon (rural)	American College of Surgeons NM Committee on Trauma
2. ED Physician (urban), ED Physician (rural)	NM American College of Emerg. Physicians
3. Emergency Nurse	NM Emerg. Nurses Assoc.
4. Trauma Nurse Coordinator	Trauma Nurse Forum
5. Paramedic (EMT-I/EMT-B)	EMT Association
6. Neurosurgeon	NM Neurosurgeon Assoc.
7. Orthopedist	NM Orthopedic Assoc.
8. Pediatrician	NM Pediatric Assoc.
9. Flight Nurse/Paramedic	Air Transport Comm.
10. Rehabilitation	

11. Indian Health Service
12. Health Promotion/Injury Prevention
13. Health Insurance Industry Insurance Commission
14. Representative from each Regional Trauma Advisory Council
15. Member-at-large from EMS Advisory Committee
16. New Mexico Hospital and Health System Association
17. Designated trauma centers in neighboring states that demonstrate active participation in New Mexico EMS and who serve the New Mexico population in a routine manner and submit data to the New Mexico State Trauma Registry.
18. Each New Mexico designated trauma center
20. One Pueblo/Reservation EMS Representation
- 21.** One Urban and One Rural EMS representative from each EMS region
22. Consumer Representation, Elderly and Youth
23. New Mexico Medical Society
24. Public Health Response Preparedness
- 25.** Office of Rural Health Representative
- 26.** Rep. from New Mexico Trauma Registry Committee Hospital Registrars

APPOINTMENT TO MEMBERSHIP

Submitted nominations for membership will be reviewed by the TASSC Executive Committee and forwarded to the Statewide EMS Advisory Committee for appointment.

Notice of any change in voting membership shall be made by the representative organization to the State Trauma Systems Manager and TASSC Chair 24 hours prior to the scheduled TASSC meeting.

Only one person may serve any one membership during any given time.

VI TERM OF MEMBERSHIP

The term of each representative member of the TASSC will be set by the representative organization.

VII EX-OFFICIO MEMBERS

Ex Officio members shall be the Chief of the Bureau, the State EMS Medical Director, the State Trauma Systems Manager, the State Trauma Registrar, and any other appointed by the Chair.

VIII. REMOVAL FROM THE TASSC

Removal of members from TASSC for cause shall be effected as follows:

1. A recommendation for removal from the Executive Committee;
2. A two-thirds vote of the membership at any regularly scheduled TASSC meeting
when a quorum is present to approve the recommendation;
3. Forwarding of the recommendation to the Statewide EMS Advisory Committee, and
4. Action by the Statewide EMS Advisory Committee to approve.

“Cause” includes, but is not limited to:

1. More than two (2) unexcused absences in any twelve (12) month period;
2. Or, the member no longer represents the institution, organization or group for which membership was extended.

A member is not deemed absent and unexcused from a scheduled meeting if he/she

1. Sends a representative who reports to the Chair, or
2. Submits to the Chair, prior to adjournment, material relevant to the agenda in either oral or written form, or
3. Submits, prior to the adjournment, justification for absence that is acceptable to the Chair.

The Executive Committee shall review the status of any member who has two (2) unexcused absences in the preceding twelve-(12) month period. On recommendation from this Committee, the Chair shall send a letter of notification to the individual member and a letter to the representative organization requesting a replacement. The Statewide EMS Advisory Committee will deal with any appeal.

IX. OFFICERS

Candidates for the positions of Chair and Vice-Chair shall be nominated and elected by a majority of membership when a quorum is present. The term of office shall be for two years without prejudice to re-election. The “Chair” and “Vice-Chair” will be used in this document to refer to these two positions.

The Chair shall preside at regularly scheduled meetings of TASSC and at meetings of the Executive Committee. The Chair shall also appoint chairpersons of subcommittees as deemed appropriate to the objectives of the TASSC. The Chair shall also represent the TASSC in issues affecting its constituency.

The Vice-Chair will preside at meetings and carry out other functions in the absence of the Chair.

The Bureau staff shall be responsible for committee support including the recording, publishing and preserving of the minutes, reproduction of material, handouts, reimbursement procedures, etc.

X. STANDING SUBCOMMITTEES

Sub-committees may be formed as necessary at the discretion of the Chair.

XI EXECUTIVE COMMITTEE

The Executive Committee shall consist of the Chair, the Vice-Chair, three members selected from the general membership, and as ex-officio, the EMS Bureau Chief, State EMS Medical Director, and the Trauma Systems Manager. The selected members of the Executive Committee shall serve a term of two (2) years without prejudice of re-selection. The current TASSC Chair shall serve as Past Chair for one (1) year as a voting member. The responsibilities of the Executive Committee shall be to consider and forward to the TASSC recommendations on candidates for election to TASSC offices, removal of members from TASSC, system review issues and any other issues designated by the Chair or upon request from the Bureau.

XII CONDUCT AND SCHEDULING OF MEETINGS

1. General membership meetings will be conducted on a quarterly basis. Unscheduled meetings of the general membership and/or the Executive Committee shall be called by the Chair as appropriate to the need.
2. All meetings of the general membership of TASSC shall be open to the public.
3. Meetings shall be conducted under parliamentary procedure outlined in "Roberts Rules of Order". A quorum shall consist of the membership present, if not less than eleven (11) TASSC members. A voting member

may carry to any meeting of the TASSC a written, dated proxy to vote for any another non-attending voting member.

4. The TASSC is a “review organization” as defined by the Review Organization Immunity Act (“ the Act”), 541-9-2E, NMSA 1978 (as amended by Laws 1993, Chapter 161). Minutes maintained by the TASSC involving patient care are protected in accordance with the confidentiality provisions of the Act 541-9-5 NMSA 1978 and as interpreted by the New Mexico Supreme Court in Southwest Community Health Services vs. Smith 107 NM 196, 755 p. 2d 40 (1988). Data will be reported to the committee in form of statistical analysis only.
5. TASSC guidelines can be changed by a vote of two-thirds of the TASSC voting membership, subject to approval by the EMS Advisory Committee.

XII FUNDING

1. Reimbursement for travel expenses will be in accordance with the NM State Mileage Act as funds are available.
2. Financial data keeping and accountability for funds shall be the responsibility of the Bureau.

Approved by a majority vote of the Statewide EMS Advisory Committee on 18 November 2005

Chair: _____
Mike Miller

Date: _____