

BYLAWS OF



DATE OF APPROVAL/ADOPTION: 02-13-2004

DATE OF AMENDMENTS: 04-21-2017

Motion to accept proposed amendments: Dr. Raspanti

Second the motion to accept proposed amendments: Dr. Sing

All in favor to accept proposed amendments: All in attendance

Opposed the motion to accept proposed amendments: None

ARTICLE I

NAME and PURPOSE

Section 1. NAME

The Regional Advisory Committee (RAC) shall be known as:

Metrolina Trauma Advisory Committee (MTAC)

MTAC shall be comprised of the following North Carolina Hospitals and EMS Systems and shall be referred to in this document as the RAC's "region".

Primary Hospital Members

1. Carolinas Healthcare System Blue Ridge- Morganton
2. Carolinas Healthcare System Blue Ridge- Valdese
3. CaroMont Regional Medical Center (Level III Trauma Center)
4. Catawba Valley Medical Center
5. Atrium Health Anson
6. Atrium Health Cleveland (Level III Trauma Center)
7. Atrium Health Kings Mountain
8. Atrium Health Lincoln
9. Atrium Health Cabarrus (Level III Trauma Center)
 - a. Atrium Health Harrisburg Emergency Department
 - b. Atrium Health Kannapolis Emergency Department
10. Atrium Health - Mercy
11. Atrium Health - Pineville
 - a. Atrium Health Steele Creek Emergency Department
12. Atrium Health Stanly
13. Atrium Health Union
 - a. Atrium Health Waxhaw Emergency Department
14. Atrium Health University City
 - a. Atrium Health Huntersville Emergency Department
15. *Atrium Health's Carolinas Medical Center (Level I Trauma Center/Lead RAC agency)
 - a. Carolinas Healthcare System- SouthPark
16. Lake Norman Regional Medical Center
17. Levine's Children's Hospital (Level I Pediatric Trauma Center)
18. Novant Health Huntersville Medical Center
19. Novant Health Mathews Medical Center
20. Novant Health Mint Hill Medical Center
21. Novant Health Presbyterian Medical Center (Level III Trauma Center)
22. Scotland Memorial Hospital

Primary EMS Systems

1. Anson County EMS
 - a. Anson Rescue Squad
2. Burke County EMS

3. Cabarrus County EMS
4. Catawba County EMS
5. Cleveland County EMS
6. Gaston County EMS
7. Lincoln County EMS
8. Mecklenburg EMS (MEDIC)
 - a. Mint Hill Rescue
9. Stanly County EMS
10. Union County EMS
11. Scotland County EMS

Additional agencies and hospitals that may participate in the RAC:

- South Carolina hospitals and EMS systems that routinely transfer trauma patients to Trauma Centers within the RAC
- Hospitals and EMS systems that routinely transfer trauma patients to Trauma Centers within the MTAC region and belong to another NC RAC. The hospitals and EMS systems will not have voting privileges, however will be allowed and encouraged to participate in MTAC activities.

Section 2. PURPOSE

The Regional Advisory Committee's (RAC's) responsibilities are outlined in the North Carolina Administrative Code (see 10A NCAC 13P .1101, .1102, and .1103). Initially, the purpose of the RACs were to create regional trauma planning to include establishing and maintaining a coordinated trauma system.

Following September 11, 2001, RAC responsibilities/members significantly expanded to account for increased disaster and terrorism related activities.

*See Metrolina Healthcare Preparedness Coalition (MHPC) for further information. Note- MHPC does not fall under the responsibilities nor authority of MTAC. However, the two entities share common members and region. Therefore, MTAC and MHPC leaders should have frequent and open communication.

ARTICLE II

GENERAL MEMBERSHIP AND QUALIFICATIONS

Section 1. MEMBERSHIP

- a. MTAC shall consist of the following individuals at a minimum:
 - 1) Trauma Medical Director(s) or designee from the lead RAC agency
 - 2) Trauma Program Manager(s) or Trauma Nurse Coordinator(s) from the lead RAC agency
 - 3) If on staff, the Outreach Coordinator(s), or designee(s) from the lead RAC agency

- 4) If on staff, an Injury Prevention Coordinator(s), or designees(s) from the lead RAC agency
 - 5) RAC Registrar or designee(s) from the lead RAC agency
 - 6) Senior Level Hospital Administrator from the lead RAC agency
 - 7) Emergency Physician from the lead RAC agency
 - 8) Representative from each EMS System participating in the RAC
 - 9) Representative from each hospital participating in the RAC
 - 10) Community representatives from the lead RAC agency's catchment area
 - 11) EMS System Medical Director or Assistant Medical Director from the lead RAC agency's catchment area.
- b. Additional representation may be assigned to ensure representation from all areas are present.
 - c. Consideration will be given to any county within the RAC's area that does not include a hospital to ensure adequate participation in the work of the RAC.
 - d. RAC members may include individuals from South Carolina.
 - e. Any MTAC member may recommend another individual for membership to the committee at large, however they can only be appointed by Chairperson.

Section 2. MEMBERSHIP AND VOTING PRIVILEGES

a. Membership Privileges

Members who have joined the Metrolina Trauma Advisory Committee shall have the right to:

1. Vote as outlined below in (b)
2. Attend all meetings
3. Work on assigned committees and subcommittees
4. Provide input into the decision-making process
5. Recommend members for nomination.

b. Voting Privileges:

Although the RAC encourages attendance and input at its regular and special meetings from all interested parties, for the purposes of voting, the following rules shall pertain:

Voting members include the following:

- (1) Trauma Medical Director from each Trauma Center
- (1) Trauma Program Manager from each Trauma Center
- (1) Representative from each RAC Hospital

(1) Representative from each RAC EMS Agency
Chair shall only vote in the event of a tie.

c. Conflict of Interest

Members shall exercise good faith in all transactions pertaining to their duties to the RAC and their dealings on behalf of the RAC in which they are each held to a rule of honest and fair dealings between themselves and the RAC. They shall not use their positions as members or knowledge gained from the position for their personal benefit or anything that could be detrimental to the RAC.

Exclusion from voting. Any member having a conflict of interest on a matter shall disclose such interest and abstain from voting as appropriate.

Section 3. TERMS OF MEMBERSHIP

a. Terms

Membership shall remain in effect until an individual resigns, is removed, or otherwise disqualified to serve or until his/her successor is appointed/elected, whichever occurs first.

b. Removal and Resignation

Any member may resign by giving written notice to the presiding Chairperson of the RAC. The resignation will be effective upon receipt or specified date in the notice.

c. Vacancies

Vacancy position caused by resignation or removal shall be filled by the member organization within the following 2 quarterly meetings.

ARTICLE III

OFFICERS AND DUTIES OF OFFICERS

Section 1. DESIGNATION OF OFFICERS

a. Officers

The officers of the Metrolina Trauma Advisory Committee shall include the following:

- Chairperson- MTAC Medical Director (1)
- Co-Chairperson– MTAC Coordinator (1)

- Secretary– Elected (1)

The officers shall constitute the Executive Committee for MTAC and may carry out such responsibilities as occasionally requested by the general membership. Such officers shall be representatives of the institutions that have chosen MTAC as their administrative RAC. The Co-Chairperson position shall be filled by the MTAC Coordinator. All other officers shall be elected at the January RAC meeting. The officers shall be elected at the first quarterly meeting of each odd calendar year.

b. Terms

Officers are elected by the voting members at the first quarterly meeting and shall serve a 2-year term.

c. Removal and Resignation

Any officer may resign by giving written notice to the Executive Committee or the RAC Coordinator. The resignation will be effective upon receipt or specified date in the notice. Any officer who has two consecutive unexcused absences from MTAC quarterly meetings will be deemed voluntarily resigned.

d. Vacancies

Any officer vacancy caused by resignation or removal shall be filled by appointment by the Chairperson or Vice Chairperson for the remainder of the unexpired term.

Section 2. DUTIES OF THE OFFICERS

The officers shall perform the duties usually performed by such officers and any other duties defined in these bylaws. Additionally, the officers shall function as the Executive Members for MTAC.

ARTICLE IV

MEETINGS

Section 1. GENERAL MEETINGS AND NOTICE THEREOF

a. Frequency & Location

Per NCEMS 10A NCAC 13P.1102, the Metrolina Trauma Advisory Committee shall meet at least two times or more per year if necessary.

b. Notification

Written or verbal notice of any general meeting shall be given to the voting membership at least 30 days prior to the date of the meeting. The date, time, and place shall be specified.

c. Minutes

General Session minutes shall be kept and shall contain a record of the activities of the meeting. The dates, time, and place shall be specified. Any patient care report(s) used for review and/or other education during the RAC sessions will be properly demarked of all facility and patient identifying information before use. Any patient care report used will also be properly disposed of immediately following the conclusion of the meeting maintaining HIPPA compliancy. This rule is to be in direct compliance with CHS policy # PR.PHI 145.15

Section 2. SPECIAL MEETINGS & NOTICE THEREOF

Special meetings of the members may be called by any designated officer by giving at least ten days written or verbal notice to the membership. The date, time and, place shall be specified.

Section 3. ANNUAL MEETING

The Annual MTAC Business Meeting for the purpose of elections and other business that may arise at that time shall be held during the first meeting of each calendar year.

ARTICLE V

COMMITTEES

Section 1. STANDING SUBCOMMITTEES

a. Frequency & Notification

Each subcommittee shall meet as often as necessary to perform its duties. Sufficient verbal or written notice of the date, time, and place of any such meeting shall be given.

b. Types

Initial standing subcommittees shall include the following, with the understanding that additional subcommittees may be added as necessary:

Emergency Medical Services

Injury Prevention
 Trauma Performance Improvement/Peer Review
 Registrar
 Trauma Program Managers/Emergency Department Directors or Leaders
 Regional Committee on Trauma

f. Membership

The chairperson of the subcommittees will be a voting member of MTAC and will be appointed by the MTAC Chairperson. The subcommittee chairperson will convene meetings, plan agendas, and report committee activities during the general session meeting. Members of the subcommittees may be comprised of MTAC voting members and ad hoc members with an interest or specialty in the Committee. The chairperson shall oversee the appointments of the subcommittees.

g. Minutes

Each Subcommittee shall designate a member to keep minutes. Minutes shall be kept for each meeting and submitted to the MTAC Coordinator for record. Any patient care report(s) used for review and/or other education during the RAC sessions will be properly demarked of all facility and patient identifying information before use. Any patient care report used will also be properly disposed of immediately following the conclusion of the meeting maintaining HIPPA compliancy. This rule is to be in direct compliance with CHS policy # PR.PHI 145.15

Section 2. AD HOC COMMITTEES

a. Frequency & Notification

Additional committees may be added by the Chairperson or Co-Chairperson as needed. Each ad hoc committee shall meet as often as necessary to perform their duties. Sufficient verbal or written notice of the date, time, and place of any such meeting shall be given.

b. Minutes

Minutes shall be taken for each Ad Hoc committee meeting and are to be submitted to the MTAC Co-Chairperson for record.

ARTICLE VI

QUORUM

Section 1. Attendance Records

Attendance records shall be kept by the MTAC Coordinator for all MTAC meetings.

Section 2. Executive Committee, General, & Subcommittee/Ad Hoc Committee

a. Executive Committee

A majority of the members shall constitute a quorum, to include the Chairperson and Co-Chairperson. No action will be taken at a meeting at which less than a quorum is present is valid unless approved in writing by the absentee members.

b. General Meetings

The majority of the MTAC's voting membership shall constitute a quorum for the conduct of business. No action taken at a meeting in which less than a quorum is present is valid unless approved in writing by the absentee members. Voting members who are unable to attend may vote electronically. Electronic voting should be submitted to the Chairperson and Co-Chairperson.

c. Subcommittee or Ad Hoc Committees

A majority of the members shall constitute a quorum. No action taken at a meeting at which less than a quorum is present is valid unless approved in writing by the absentee members. Voting members who are unable to attend may vote electronically. Electronic voting should be submitted to the Subcommittee Chairperson.

ARTICLE VII

CALENDAR/FISCAL YEAR

The fiscal/calendar year of the organization shall be defined as January 1 to December 31.

ARTICLE VIII

PARLIAMENTARY PROCEDURE

The rules contained in the Robert's Rules of Order, Revised shall govern meetings of the RAC and its subcommittees in all cases to which they are applicable and in which they are not inconsistent with these Bylaws.

ARTICLE IX

CONFIDENTIALITY

MTAC shall be responsible for analyzing trauma patient care data and outcome measures to evaluate the ongoing quality of patient care, system performance, and medical direction. Review of medical records by the Trauma Peer Review Committee is confidential and protected under G.S. 143-518. The Trauma Peer Review Committee, its members, proceedings, records, and materials produced shall be afforded the same protections afforded to Medical Review Committees, their members, proceedings, records, and materials under G.S. 131E-95. This rule is to be in direct compliance with CHS policy # PR.PHI 145.15

ARTICLE X

AMENDMENTS TO BYLAWS

These bylaws may be amended at any annual or general meeting by a 2/3 vote of those required for a quorum, provided the proposed amendments have been sent to all members at least ten days before the meeting.

ARTICLE XI

ADOPTION OF BYLAWS

We, the undersigned, representing the membership of the Metrolina Trauma Advisory Committee consent to and adopt the foregoing bylaws as the bylaws of this organization.

SIGNATURES:

Dr. Ronald Sing, DO- MTAC Medical Director/Chairperson

_____ (Sign) _____ (Date)

Scott Wilson, BA, NREMT- MTAC Coordinator/Co-Chairperson

_____ (Sign) _____ (Date)