NEW MEXICO TRAUMA SYSTEM FUND
for
TRAUMA SYSTEM DEVELOPMENT
Request for Applications
for State fiscal year 2011
01 July 2010 – 30 June 2011

Overview
This document describes the required process for eligible trauma system development projects to receive funding for State Fiscal Year 2011 (FY11). Funding will be issued through a separate agreement between each approved organization and the New Mexico Department of Health (DOH) and will be subject to the state procurement code and sub-grant agreement process.

In 2006, the New Mexico Legislature passed House Bill 266, the Trauma System Fund Authority Act (TSFAA), in response to a 2005 Governor’s Trauma Task Force study on the crisis in trauma care in New Mexico. The Task Force committee's report “New Mexico TRAUMA CARE CRISIS 2006.” described the crisis and mitigation recommendations that prompted the TSFAA to establish a Trauma System Fund Authority (TSFA). The TSFA has clear direction and purpose: to sustain existing trauma centers; support the development of new trauma centers; develop a statewide trauma system; and, distribute the trauma system fund created by the TSFA.

The TSFA established general guidelines for statewide trauma system development funding use. However, the TSFA delegated the application process and the review of all applications to the Trauma Advisory and System Stakeholders Committee (TASSC). TASSC presents prioritized funding recommendations to the TSFA, which has final authority for funding allocations.

This document provides guidance for completing the application, describes the procedures for application submission and funding approval.

Funding Focus and Guidelines
The Governor’s Task Force Report stated that a trauma system matches the needs of the traumatically injured person to the facility with the resources to treat the patient and achieve the best possible outcome. A trauma system is an organized, pre-planned approach to caring for the severely injured patient, which facilitates optimal outcomes (i.e., life vs. death, health vs. disability). It includes a continuum of care: injury prevention, emergency medical services, community hospital emergency departments, hospital-based trauma centers, hospital inpatient care, rehabilitation, and outpatient follow-up treatment. Applicants for funding must address how proposed projects will provide support to trauma system development in New Mexico and are in alignment with New Mexico trauma system strategic planning.

Accountability
This section describes the required process for eligible projects to receive funding for the stated funding period, fiscal year 2011. Funding will be allocated through a separate agreement between each approved organization and the DOH and will be subject to the state procurement code and sub-grant agreement process. NMAC 7.27.9.13

Funding recipients whose projects result in certification must demonstrate proof of successful certification by submitting documentation as specified in the MOA. It will be the responsibility of the funding recipient to submit a record of all costs and activities related to the administration of the project. Submit reports to the NM Department of Health Trauma Systems Manager (TSM) as detailed in the finalized Memorandum of Agreement (MOA). To ensure accountability and to maintain an informed TSFA membership, the TSM shall then provide the TSFA with updates detailing project status.

Funding recipients must participate in their local trauma system development meetings (ReTrACs, RACS, liaisons and others) for the purpose of trauma system development and strategic planning. Documentation of participation is required.

Funds for projects must be expended or encumbered prior to June 1, 2011. To encumber funds, funding recipients who do not complete projects by June 1, 2011 must submit a written request to the TSM detailing the reason for non-completion, expected completion date, and request for extension. The TSM must receive the request prior to June 1, 2011. The TSM will then present the request to the TSFA. The TSFA may grant the extension or encumbrance. However, if the MOA deliverables are incomplete and the TSM receives no extension request, the TSFA may request the return of funds and may deny future funding.
**Eligible Costs**
Funding will be provided for eligible costs as detailed in Section E: Detailed Budget of the application and described in the resulting agreement. Examples of costs that are NOT eligible for funding include items such as FTE positions, fringe benefits, indirect costs, supplies, and day-to-day operating expenses (fuel, rent insurance payments, etc.). Land purchases and any construction costs are not eligible.

Priorities for trauma funding will include, in no particular order, equipment, and training, improvement of injury data collection, support for traumatic injury prevention programs, and rehabilitation programs. A minimum of 10% cash and/or in-kind commitments of personnel time and other costs toward the project goals is required.

**Incurring Costs and Unfunded Applications**
The TSFA reserves the right to reject any or all applications and is not liable for any costs incurred by the applicant. Any costs incurred in the preparation the application shall be borne by the applicant.
APPLICATION PROCESS

Application Submission
The deadline for submitting completed applications and supporting documents is close of business February 1, 2010. Submit the completed application to:

New Mexico Trauma Systems Manager
EMS Bureau, NM DOH
1301 Siler Road, Building F
Santa Fe, NM 87507
ATTN: Trauma System Development Funding Application

Submitting an application does not ensure funding from the TSFA. If projects are funded, any costs incurred prior to the contract beginning date will not be reimbursed.

Application Content
Applications must be typed or computer generated on letter-sized paper with content described below.

A completed application must include:

A. A brief and concise sentence or two describing your project
B. A detailed description of the problem the project is to address relating to a funding purpose to develop a statewide trauma system and alignment with New Mexico DOH Strategic Plan FY11 (See Appendix A)
   • HEALTH SYSTEM OBJECTIVE 4: Improve emergency medical services and the trauma care system across the state
   • Strategy 7: Ensure sustainability of EMS operations in rural areas, American Indian and border communities
   Also, include
   • Substantiation that the project is evidence based
   • A timeline for completion of all phases of the project
C. A description of how the outcome(s) or impact of the project will improve the trauma system and
   • How outcomes and impacts will be measures
   • How outcomes and impacts will be reported
D. Summary Cost of Project
E. Detailed Budget
   • A detailed budget narrative detailing specific expenditures
   • Amounts and sources of cash or in-kind contributions
   • Quote pages for equipment and/or services
F. A minimum of three letters of collaboration/support
G. Previously funded projects and their outcomes
H. Disclosure of funding request from EMS fund Act
I. Disclosure of funding request from other sources
J. Prioritization of project components if funding request is partially granted

Application Review, Evaluation Process and Criteria
All projects will be categorized as local, regional, or statewide, based on the project’s area of service. All completed applications will be reviewed, evaluated, and prioritized employing the following evaluation process. The Trauma System Fund Authority will have final approval on project funding.

Statewide projects will be reviewed, evaluated, and prioritized by:
• All EMS Regional Offices and the Department of Health EMS Bureau
• TASSC Executive Committee, with recommendations from the EMS Regional Offices, and the Department of Health EMS Bureau
• TASSC General Committee, with recommendations from TASSC Executive Committee
• TSFA for final approval and allocation of funds, before July 31

Local and regional projects will be reviewed, evaluated, and prioritized by:
• Affiliated EMS Regional Office and the Department of Health EMS Bureau
- TASSC Executive committee, with recommendations from the affiliated Regional Offices and the Department of Health EMS Bureau
- TASSC General Committee, with recommendations from TASSC Executive committee
- TSFA for final approval and allocation of funds, before July 31

Evaluation criteria include, but are not limited to:
- Project service area
- Type of organization providing service
- Project description
- Description of area of improvement
- Goals of project
- Evidence/research basis for project
- Project timeline
- Project’s impact on community
- Total cost of project including strength of cash/in kind contributions
- Strength of letters of support
- Past performance
- Completeness of application
- Project goal(s)/objectives/activities and related timelines
Trauma System Development Application

Begins on next page

Please return type written or computer generated application to the NM Department of Health

Attention:
Trauma Systems Manager
1301 Siler Road, Building F
Santa Fe, NM 87507
NEW MEXICO TRAUMA SYSTEM FUND
for
TRAUMA SYSTEM DEVELOPMENT
Request for Applications
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01 July 2010 – 30 June 2011

Due Date: February 1, 2010

AMOUNT REQUESTED $ ___

Instructions: Every question must be answered. If a section does not apply to your organization, put N/A in the blank. Please send original application to the following address, no later than 01 February 2010. NO FAXED OR INCOMPLETE APPLICATIONS WILL BE ACCEPTED.

New Mexico Trauma Systems Manager
EMS Bureau, NM DOH
1301 Siler Road, Building F
Santa Fe, New Mexico 87507
505-476-8220

If you have any questions, or need assistance with the application process, please contact your EMS Regional Trauma Coordinator or the Trauma Systems Manager at the DOH/EMS Bureau.

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<tr>
<th>Affiliation: (Applying Agency / Service / Organization)</th>
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<tbody>
<tr>
<td>Address:</td>
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<tr>
<td>(Street / Mailing Address)</td>
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<td>(City)</td>
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<tr>
<td>Applicant/Contact: (Contact Person for this Application) (Title)</td>
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<td>(Telephone #)</td>
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<td>Check (X) appropriate Regional EMS Office affiliation:</td>
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<td>Fiscal Agent: (County / Municipality / Hospital / Other)</td>
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<td>Contact Person: (Name) (Title)</td>
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### Service Area of Project
- [ ] Statewide
- [ ] EMS Region I
- [ ] EMS Region II
- [ ] EMS Region III
- [ ] County-wide or counties-wide
- [ ] Local

### Type of Agency / Service / Organization: (check all that apply)
- [ ] Volunteer Service
- [ ] First Responders
- [ ] Fire Department
- [ ] EMS Service
- [ ] For-Profit Organization
- [ ] Rehabilitation
- [ ] Hospital
- [ ] Educational Organization
- [ ] Community-Based
- [ ] Injury Prevention
- [ ] Non-Profit Organization
- [ ] Other: Please list

### Proposed Trauma System Development Project: (check all that apply)
- [ ] Trauma Related Professional Education
- [ ] Trauma Research
- [ ] Data Management
- [ ] Upgrading Service
- [ ] Rehabilitation
- [ ] Community Education
- [ ] Trauma Care Equipment
- [ ] Injury Prevention
- [ ] Trauma Quality Improvement
- [ ] Other: Please list

### A. Project Description:
In one or two sentences, describe your project.

### B. Detailed Analysis
Provide: 1) a detailed description of the area of improvement the project is to address  2) substantiation that the project is evidence based and 3) a timeline for completion of all phases of the project.
C. Project Impact:
Describe how the project: 1) is aligned with the New Mexico DOH Strategic Plan FY11 Strategy 7 (see Appendix A), 2) will improve the trauma system and 3) outcome(s) will be measured and reported.

D. Summary Cost of Project: list project components and budget amounts below
Administration cost cannot exceed 10% of the project cost.

<table>
<thead>
<tr>
<th>Project Components</th>
<th>Anticipated Cost</th>
<th>Cash/In Kind Contributions/or other funding</th>
<th>Actual Request from Trauma System Fund Authority (less cash/in kind)</th>
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<td>Total Cost of Project:</td>
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Source(s)
Attach additional sheet describing in-kind contributions.

E. Detailed Budget
Attach a separate page(s) that includes a detailed budget listing specific expenditures and cash or in-kind contributions. Add the dollar amount from other sources of funding for this project but explain the funding in sections H and/or I. Verify all expenditures on an attached price quote page(s) on the vendor’s letterhead. The quote page should include a description of the service or equipment, the cost of the service or equipment, a date the quote originated, and a signature of the person authorized to issue the quote. Label the page(s) “Section E Detailed Budget” then page 1E, 2E, 3E ……

F. Letters of Collaboration/Support:
A minimum of 3 letters of collaboration or support are **required, and must be submitted with your application. At least one of the 3 letters of support must be from your EMS Regional Office.** Letters of support submitted after the application is submitted will not be accepted. Letters must address HOW the project will strengthen trauma system partnerships within the project area. Form letters are not recommended.
G. Has the TSFA funded you in previous years?

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<th>YES</th>
<th>NO</th>
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If yes, describe the project, the FY it was funded, the project’s current status and the outcome:


H. Have you applied to the EMS Fund Act for FY11 funds for this project or a portion of this project?

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<th>YES</th>
<th>NO</th>
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If yes, state the amount of your request and for what you will use EMS funds:


I. Have you applied to any other sources for funds for this project?

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<th>YES</th>
<th>NO</th>
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If yes, name the funding source, the status of your funding request, and for what you will use the funds:


J. If TSFA does not totally fund your project, how much of your project can you complete with 75% funding? 50% funding? 25% funding?


ASSURANCES

The following are required assurances associated with your Trauma System Development Funding project for Fiscal Year 2011:

- We agree that funds received through this distribution will be used only for the purposes stated in the application and under the conditions expressed in the resultant MOA or its approved amendment(s);

- We agree that we will provide some support and involvement either by cash and/or in kind contributions as described in this application;

- We understand and agree to comply with all applicable requirements of the New Mexico Department of Health;

- We agree that the information contained in this application is true and correct to the best of our knowledge; and,

- We agree to participate in trauma planning committees as referenced on Page 2, Accountability.

<table>
<thead>
<tr>
<th>Project Coordinator</th>
<th>Person Authorized to sign agreement:</th>
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<tr>
<th>Alternate Contact Person</th>
<th>Medical Director (required for project as per scope of practice)</th>
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<td>Name:</td>
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**NEW MEXICO TRAUMA SYSTEM FUND**

for

**TRAUMA SYSTEM DEVELOPMENT**

Request for Applications
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**APPLICANT CHECKLIST**

Please review the following checklist to assure that you have addressed pertinent information and included required additional pages with your application.

### Have you completed or included in your application:

<table>
<thead>
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<th>YES</th>
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<tbody>
<tr>
<td>1. Funding amount requested listed on page 7 of application</td>
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<td>2. Proper applying agency/service/organization contact information</td>
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<td>3. Appropriate Regional EMS Office indicated</td>
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<td>4. Proper fiscal agent information provided</td>
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<td>5. Service area of project indicated</td>
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<td>6. Type of Agency / Service / Organization selected</td>
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<td>7. Project description (section A)</td>
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<td>8. Description of area of improvement the project is to address (section B)</td>
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<td>9. Description of how the project will address the area of improvement, and how the project will be measured and reported (section C)</td>
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<td>10. A budget summary and a detailed budget including price quotes (sections D &amp; E)</td>
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<td>11. A minimum of 3 letters of collaboration/support, including one from your EMS region (section F)</td>
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<td>12. Previous funding history (section G)</td>
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<td>13. Application to EMS Fund Act for this project (section H)</td>
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<td>14. Additional sources of funding for which you have applied for this project (section I)</td>
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<td>15. Your prioritization of project components if funding of less than 100% is granted (section J)</td>
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HEALTH SYSTEM OBJECTIVE 4:  
Improve emergency medical services and the trauma care system across the state.

Strategies:
1. Explore possible funding mechanisms, including those similar to the home insurance method used by the State Fire Fund Formula, to support the Emergency Medical Services (EMS) Fund Act.

2. Develop recruitment and retention strategies for EMS providers.

3. Identify funding for the New Mexico Trauma System Fund Authority to support the development and designation of trauma facilities, including the integration of adequate rehabilitation facilities.

4. Facilitate improved trauma care throughout the state by increasing use of telehealth and other available technologies.

5. Develop the trauma care system by supporting existing trauma centers and encouraging appropriate community hospitals to become designated trauma centers.

6. Recruit New Mexico hospitals and adjacent state hospitals caring for New Mexicans with severe injuries to participate in the state trauma registry program.

7. Ensure the sustainability of EMS operations in rural areas, American Indian and border communities.