Chair – Advocacy and **Health Policy Program Area**

| Date Position Begins: | 03/01/2025 |
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| Appointment Term: | Two years or Central COT membership term completion, whichever is shorter; Potential for reappointment for a second, 2-year term or until Central COT membership term completion, whichever is shorter |
| Membership Requirement: | Membership in Central Committee on Trauma |
| Participation Structure: | Advocacy and Health Policy Program Area supports all areas of the COT; Program Area Chair concurrently sits as a member of the Executive Committee |
| Reporting Structure: | Dual reporting structure to COT Chair and the Medical Directors, liaises with the STOP THE BLEED® Chair, may oversee work groups |
| Effort Requirement: | Approximately 10-15 hours per month; Participation in COT Annual Meeting, COT Trauma Meetings during ACS Clinical Congress, COT Executive Committee meetings 4 times per year and the annual ACS Leadership and Advocacy Summit |
| Experience/Skills Desired: | Demonstrated participation and interest in cross-pillar COT advocacy efforts; detailed knowledge of the STOP THE BLEED® program |

Chair, Advocacy and Health Policy Program Area Overview

This committee has the important task of working in conjunction with both the Regional and Central Committees on Trauma (COT), the ACS Division of Advocacy and Health Policy (DAHP), ACSPA-SurgeonsPAC, ACS Surgeons Voice, and ACS Chapters, to continually analyze, advocate, and provide input on trauma-related legislation at all levels of government (local, state, and federal) and to facilitate advocacy efforts for COT projects and programs. Key COT focus areas anticipated for 2025-2026 include funding and support for the development of Regional Medical Operations Coordination Centers (RMOCCs) and a National Trauma and Emergency Preparedness System (NTEPS), promulgation of prehospital blood availability, continued funding of military-civilian partnerships, funding and advocacy for injury prevention efforts to include advancement of hospital based violence intervention programs and the continued legislation and support for ACS Stop the Bleed programs. The Chair also has the responsibility to promote and support other ACS advocacy priority programs.

Chair, Advocacy and Health Policy Program Area General Responsibilities

This position functions as a program area chair; please refer to the general expectations/requirements for the program area chair position.

Chair, Advocacy and Health Policy Program Area Specific Responsibilities

- Actively champion and promote the principles of inclusive excellence in all aspects of project work
- Collaborate with the ACS Division of Advocacy and Health Policy Advocacy, the COT Chair, COT Medical Directors, and other Program Area Chairs to establish the strategic priority areas for advocacy efforts
- In conjunction with the Medical Directors, and ACS staff partners, identify the need for work groups to carry out objectives, propose mandates, deliverable expectations, and resource requirements.
- Lead meetings of the Advocacy Program Area participants
- Provide strategic leadership and oversight to related advocacy work groups or initiatives
- Partner with COT staff for the strategic planning and execution of all approved tactics and deliverables
- Participate in Executive Committee meetings throughout the year and help represent the COT leadership at various activities

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