

WESTERN REGIONAL
EMERGENCY MEDICAL ADVISORY COMMITTEE

RULES OF OPERATION AND GOVERNANCE

ARTICLE I. NAME

The name of this organization is the Western Regional Emergency Medical Advisory Committee (WREMAC).

ARTICLE II. PURPOSE

The Western Regional Emergency Medical Advisory Committee serves the Big Lakes, Wyoming-Erie, and Southwestern Regional Emergency Medical Services Council (REMSCO) areas. The purpose of this Regional Emergency Medical Advisory Committee shall be to develop policies, procedures, and triage, treatment, and transportation protocols, which are consistent with or may exceed the standards of the State Emergency Medical Advisory Committee, and which establish standards for physicians to operate as pre-hospital Medical Directors, and to address specific local conditions; to approve physicians, who provide on-line Medical Control; to coordinate the development of a Regional Medical Control System; and to provide oversight in Quality Improvement activities addressing system-wide concerns.

ARTICLE III. RELATIONSHIPS

Section 1: The WREMAC recognizes the three Regional EMS Councils as the agencies responsible for coordinating EMS in this region and will cooperate with the REMSCOs in working toward the improvement of emergency medical care in Western New York.

Section 2: WREMAC, in carrying out its responsibilities and functions, relies on financial resources, which shall be made available, from the REMSCOs and or the program agency to effectively perform the duties of the WREMAC.

Section 3: The WREMAC will present a proposed budget to each REMSCO and or the program agency no later than December 1 of the preceding year. The Regional Council may amend the proposed budget as necessary.

Section 4: All approved motions of the WREMAC shall be brought forward to the REMSCOs.

ARTICLE IV. MEMBERSHIP

Section 1: The WREMAC shall have a voting membership of not less than five (5) emergency department physicians. Each hospital and their emergency department physicians in the region shall be invited to nominate a single physician who meets Service Medical Director criteria (DOH 95-01) to serve a term of three (3) years.

Members may be approved by the WREMAC to succeed themselves and may elect other physicians to voting membership who meet Service Medical Director criteria (DOH 95-01). Each REMSCO will be represented by no less than two (2) physicians. All nominated physicians will be approved by the appropriate REMSCO.

Section 2: Voting members may be represented by an alternate physician who meets the Service Medical Director criteria (DOH 95-01). An alternate shall be entitled to vote in place of his/her principal only when that principal is not present at a meeting. Non-voting members may be represented by an alternate. All alternates shall be approved by the WREMAC and serve as long as the member wishes.

Section 3: Non-voting members: There shall be one (1) EMS provider representatives appointed by each of the three REMSCOs. Agency Medical Directors may also be non-voting members of the WREMAC. EMS provider representatives shall serve a term of three (3) years and may be appointed to succeed themselves. The Medical Directors shall serve for as long as they hold that position. In addition, Chairs of the Nurse Advisory Committee and the Pre-hospital Advisory Committee shall be appointed as non-voting members.

Section 4: Removal from membership: Any voting members who have been absent without cause or not represented by his/her alternate from half of the regular meetings will have his/her membership reviewed and acted upon by the WREMAC. The WREMAC shall vote to remove the member from the WREMAC or institute a six month probationary period during which the member and his/her alternate must attend all meetings. Failure to comply with the requirements of the probationary period will result in automatic removal of the voting member from the WREMAC.

Section 5: When a voting member's term expires, the WREMAC shall either reappoint the member to another three (3) year term or notify the member of the WREMAC's decision not to reappoint. Before reappointment occurs, the member shall be approved by the appropriate REMSCO. The member will continue to serve until a replacement is named, only if his/her membership is required to maintain the minimum five physician voting membership.

ARTICLE V. OFFICERS

Section 1: The officers of the WREMAC shall consist of the Chair, Vice-Chair and Secretary. It is recommended that the Chair and Vice-Chair represent different REMSCOs.

Section 2: The Chair shall preside at all regular and special meetings of the WREMAC. The Vice-Chair shall perform the duties of the Chair in the latter's absence. In the event of a vacancy in the office of Chair, the Vice-Chair will automatically assume the position of Chair to complete the unexpired term. A Vice-Chairperson will then be elected by the voting membership.

Section 3: Regional Medical Director – The Regional Medical Director is the official spokes person for the REMAC. He/she is empowered by the REMAC to oversee the day to day operation of the Regional Medical Control System and suspend the authorization to provide

advance care of the pre-hospital care provider or service or the medical control authority of the medical control physician or hospital, subject to subsequent REMAC review.

ARTICLE VI. MEETINGS

Section 1: The WREMAC shall meet in January, March, May, June, September, and November on the third Wednesday of those months. The meetings shall be held at a location convenient to the membership whenever possible. The membership shall be given at least ten (10) working days notice of any meeting.

Section 2: The operating year of the WREMAC will be from January 1 to December 31.

Section 3: Voting members present at any meeting will constitute a quorum. If a REMSCO is not represented by a physician, motions made specific to that REMSCO must be tabled until representation is present.

Section 4: Minutes shall be maintained of all WREMAC meetings, which will be distributed to all WREMAC members and REMSCO Chair persons.

Section 5: Special Members Meetings: Special meetings of the WREMAC may be called by a request of one-third (1/3) of the voting membership present or Chairperson. The membership of the WREMAC must be given at least ten (10) working days-notice of any special meeting.

ARTICLE VII. SUBCOMMITTEES

Section 1: Subcommittees as needed for the effective discharge of the WREMACs responsibilities may be recommended by the Chair or any voting member and approved by majority vote of the WREMAC. Members of such subcommittees are not required to be members of the WREMAC. Once the voting members approve a subcommittee, the Chair may appoint members to a sub-committee.

ARTICLE VIII. CODE OF ETHICS

Members of the Western Regional Medical Advisory Committee (WREMAC) shall comply with the State of New York Public Officer's Law and shall comply with the following:

No member of the WREMAC shall have any interest, financial or other wise, direct or indirect, or engage in any business or transaction or professional activity or incur any obligation of any nature, which is in substantial conflict with the proper discharge of his or her duties as a WREMAC member. Members should exercise their duties and responsibilities as WREMAC members in the public interest for residents of the New York State, regardless of their affiliation with or relationship to any emergency medical service program, facility, agency or provider or interest group. The principles, which shall guide the conduct of WREMAC members include but are not limited to the

following:

Section 1: A WREMAC member shall endeavor to pursue a course of conduct which will not raise suspicion among the public that he/she is likely to be engaged in acts that are in violation of his/her trust as a WREMAC member.

Section 2: No WREMAC member shall permit his/her employment to impair his/her independence of judgment in the exercise of his/her duties as a WREMAC member.

Section 3: No WREMAC member shall disclose confidential information acquired by him/her in the course of his/her duties as a WREMAC member or by reason of his/her position as a WREMAC member, nor use such information to further his/her personal interests.

Section 4: No WREMAC member shall use, or attempt to use, his/her position as a WREMAC member to secure unwarranted privileges or exemptions for himself/herself or others.

Section 5: No WREMAC member shall engage in any transactions as a representative or agent of a local government body with any business entity in which he/she has a direct or indirect financial interest that might reasonably tend to conflict with the proper discharge of his/her duties as a WREMAC member.

Section 6: A WREMAC member shall refrain from making personal investments in enterprises which he/she has reason to believe may be directly involved in decisions to be made by him/her as a WREMAC member, or which will otherwise create substantial conflict between his/her duty as a WREMAC member to act in the public interest and his/her private interest.

ARTICLE IX. CONFLICTS OF INTEREST

Section 1: Absolute Disqualifications. When a member of his/her family has an interest, financial or otherwise, whether as an owner, officer, director, fiduciary employee, consultant or supplier of goods or services regarding emergency medical services whose application under Article 30 of the Public Health Law is before the WREMAC or a subcommittee of the WREMAC for consideration or determination, that member shall: (i). identify such interest to the WREMAC or its subcommittee at any meeting when the application is to be considered, (ii). absent himself/herself from any portion of any meeting when such application is considered, and (iii). not participate in any vote of the WREMAC or its subcommittee on that application. For purposes of the Article, "family" shall include a spouse, children under 21 years of age, and any other relative living in the member's household.

ARTICLE X. RULES

In order to change or amend these Rules of Operation and Governance, the proposed rule will be submitted to the membership of the WREMAC and then tabled. The proposed Rule change will then be mailed electronically or otherwise to all members, which will then be voted upon at the next regularly scheduled meeting. No proposed rule changes will be in direct conflict with Article 30 of the Public Health Law. All approved rule changes will be disseminated to the membership.

ARTICLE XI. ENTRY INTO EFFECT

In order to approve these Rules and changes, they shall be presented to the membership at any regular meeting of the WREMAC. The proposed rules shall be adopted or rejected by a majority vote of the full voting membership of the WREMAC. The REMSCOS must be advised of any changes in these rules.

ARTICLE XII. RULE REVIEW

These rules shall be reviewed by the WREMAC every three (3) years in December to ascertain that a compatible relationship is maintained between these rules, Article 30, and other appropriate laws and regulations of New York State.

Updated and approved 2009