

Western Regional Emergency Medical Advisory Committee

Title: Requirements and Responsibilities of a Service Medical Director

Policy #1995-2

Effective Date:	September 1995								
Reviewed:	June 2009	June 2014	November 2017						
Updated:									

Policy:	<p>It is the policy of the WREMAC that Service Medical Directors meet the requirements of the NYS DOH as outlined in NYS DOH Bureau of EMS Policy Statements #11-03 (<i>Providing Medical Direction</i>) and #11-05 (<i>Medical Control and Oversight</i>) as well as meet regional requirements.</p> <p>The physician must be licensed in New York State, must complete a Base Station Course or equivalent as approved by the WREMAC, and must meet at least one of the follow qualifications:</p> <ol style="list-style-type: none">1. actively work in an Article 28 emergency department (i.e. engaged in current clinical practice).2. maintain current board certification in emergency medicine (or pediatric emergency medicine);3. maintain current board certification in EMS;4. currently providing EMS medical direction under WREMAC Policy 1995-2 at the time of this revision. EMS medical direction includes, but is not limited to, management, medical oversight, quality control, REMSCO/WREMAC/SEMAC participation, teaching/training, credentialing. <p>For each qualification above, written verification(s) from the physician, a hospital administrator, an ED Medical Director or EMS agency may be required upon request from the WREMAC.</p>
Procedure:	<p>Responsibilities of the EMS Service Medical Director:</p> <p>Unless otherwise prescribed in statute, rule or policy; the responsibilities of an EMS Service Medical Director shall include, but not be limited to:</p> <ol style="list-style-type: none">1. Assure that service certified EMS personnel are oriented to the protocols promulgated by the SEMAC and the REMAC(s) for the area(s) of operation of the service,2. Interact with REMAC in the development of protocols, the regional Quality Improvement (QI) process and in disciplinary issues,3. Active development, review and participation in the Quality Improvement program developed by the service as part of the Regional Council's Quality Improvement program, as required in PHL §3006, or §3004-a,4. Participate, as necessary, with the service's certified EMS personnel in Continuing Education Programs and the re-certification process,

	<p>5. Verify, by affirmation provided by the department, that he/she serves as the medical director for the EMS service,</p> <p>6. Work with the service's providers on issues and questions regarding patient care,</p> <p>7. Participate/interact in other activities that relate to the provision of medical care or affect the patient care provided by the EMS service.</p> <p>8. Medical directors providing oversight for more than 10 agencies must apply for a waiver from the WREMAC in order to exceed the NYS DOH BEMS 10 agency limit, with the exception of an emergency appointment of the WREMAC chair as a temporary service medical director as described in WREMAC policy 1999-5 and NYS DOH BEMS policy 11-03, par. VII.</p>
Reference:	