

Report of Reference Committee:

Mr Speaker, Mr Vice-Speaker, your reference committee submits to the council the following recommendations on resolutions referred to the council for consideration.

Consent Agenda

Recommendation to Adopt:

Resolution S18-2: Procedural Sedation

Recommendation to Adopt as Amended:

Resolution S18-1: Opioid Harm Reduction

Recommendation to not Adopt:

Bylaw Amendments

Recommendation to Adopt:

Resolution S18-4: MSC Chair Voting Rights

Resolution S18-5: Fellow Voting Rights

Recommendation to Adopt as Amended:

Recommendation to not Adopt:

Resolution S18-3: Membership Resolution

Resolution S18-2: Procedural Sedation

Recommendation to Adopt.

Text:

RESOLVED that EMRA believes

- that graduates of accredited emergency medicine residency programs possess the medical knowledge and procedural skills necessary to safely administer procedural sedation, without the need for additional credentialing requirements
- that graduates of accredited emergency medicine residency programs should have the ability to choose among the full breadth of pharmacologic agents available for procedural

sedation, including but not limited to opioids, benzodiazepines, barbiturates, ketamine, propofol, dexmedetomidine, etomidate, and nitrous oxide

Discussion:

No discussion occurred on this resolution.

Resolution S18-1: Opioid Harm Reduction

Recommendation to Adopt as Amended.

Text:

RESOLVED, that EMRA

- believes that practitioners of emergency medicine can play a leading role in reducing opioid abuse and death
- should support research efforts geared toward opioid harm reduction
- should encourage training for **residents** [physicians-in-training](#) regarding safe and appropriate use of opioid [and non-opioid treatments](#)
- should support streamlining requirements for buprenorphine prescribing and [access to buprenorphine access clinics](#) in the emergency department
- should support adoption of proven strategies in opioid harm reduction including enhanced public distribution of naloxone and increased patient awareness and access to syringe exchange programs
- advocate for similar policies to be held and updated by the American College of Emergency Physicians.

Discussion:

The discussion on this resolution was in support of the general nature of the proposed language. Several amendments were proposed to broaden the scope of the policy, notably to include other forms of non-opioid treatments and related harm reduction strategies. Another amendment proposed broadening the target audience of the resolution to include “physicians-in-training” and thereby involve student members.

Resolution S18-4: MSC Chair Voting Rights

Recommendation to adopt.

Text:

RESOLVED that EMRA shall adopt the following changes to the EMRA bylaws:

“

**ARTICLE III
MEMBERSHIP**

Section 2.2 — Student Members

Section 2.2.1 — Qualifications

Any allopathic, osteopathic, or international student attending a medical school is eligible for student membership. Any student granted a leave of absence from their medical school, may remain eligible for student membership for the duration of their leave of absence, as long as it is honored by their respective school. All student members shall maintain membership in the American College of Emergency Physicians.

Section 2.2.2 — Rights

Student members are entitled to attend and address meetings of the Association, to vote, and to sit on committees. Student members, with the exception of the Medical Student Council (MSC) Chair, may not hold office.

ARTICLE V BOARD OF DIRECTORS

Section 1 — Composition of the Board of Directors

The Board of Directors shall consist of the officers of the Association, Five Members-At-Large, Ex-Officio liaisons, and the Medical Student Council (MSC) Chair as appointed by the president of the organization.

Section 1.1 — Members-At-Large

Section 1.1.1 — Qualifications

Five Members-At-Large (“Members-At-Large”) shall be elected to the Board of Directors at the Annual meeting of the Association. Members At-Large shall be chosen from the active or international membership. No more than two officers or directors may be elected from the same residency program for the same or overlapping terms of office.

Section 1.1.2 — Duties

Members At-Large shall be voting members of the Board of Directors and shall share fully with the officers of the Board of Directors in the management of the Association.

Section 1.1.3 — Vacancy

Should the seat of a Member-At-Large become vacant, or a Member-At-Large be unable or unqualified to serve, the position shall be filled by an election held at the next Annual meeting of the Association. Should the position become vacant at a time greater than six months before the next Annual meeting of the Association, the President may appoint a person to fill the vacancy for the remaining term subject to majority approval of the Board of Directors. Should the position become vacant at a time less than six months before the next Annual meeting of the Association, the President may allocate the duties of the vacant position among the remaining directors until the office is filled by election at the next Annual meeting of the Association.

Section 1.1.4 — Recall

Any Member-At-Large may be recalled at any meeting of the Representative Council by a three-quarters vote of the representatives present, as certified by the chair of the credentials and tellers committee. A recall must be initiated by a petition signed by representatives present at that meeting. The number of signatures on the recall petition shall represent at least one-third of the number of eligible votes present at the meeting in which the Member-At-Large was elected, as certified in the final report of the chair of the credentials and tellers committee in order to be valid.

In the event of recall of a Member-At-Large of the Board of Directors, a replacement shall be immediately installed in accordance with Article V, Section 1.1.3 and Article IX of these bylaws from nominations from the floor of the Representative Council to fill the balance of the unexpired term.

Section 1.2 – Ex-Officio Board Members

Section 1.2.1 — Qualifications

Ex Officio Board members will be appointed by the President of the Association with majority approval by the board of directors. Ex Officio members shall be chosen from the active, international, fellow, alumni, or student membership.

Section 1.2.2 — Duties

Ex Officio members will attend all board of director meetings, be allowed to make motions and participate in debate. Ex Officio members will not count towards quorum and will not be entitled to vote.

Section 1.2.3 — Vacancy

Should the seat of an Ex Officio member become vacant, or an Ex Officio member be unable or unqualified to serve, the position shall be filled by appointment at the discretion of the President.

Section 1.2.3 – Term

The term of Ex Officio members will be determined by the President of the Association in consultation with the Board of Directors

Section 1.3 Medical Student Council (MSC) Chair

Section 1.3.1 — Qualifications

The MSC Chair shall be a medical student member appointed annually to the Board of Directors by the President of the Association with majority approval by the board of directors.

Section 1.3.2 — Duties

The MSC Chair will attend all board of director meetings, be allowed to make motions and participate in debate.

After appointment, the MSC Chair will be presented to the EMRA Representative Council at the next meeting of the Association for consideration of confirmation as an additional voting member of the EMRA Board of Directors. If approved by a majority vote, the MSC Chair shall be a voting member of the Board of Directors and shall share fully with the other voting Members-At-Large of the Board of Directors in the management of the Association. If not approved by a majority vote, the MSC Chair will serve on the EMRA Board of Directors as an Ex Officio member.

Section 1.3.3 — Vacancy

Should the seat of the MSC Chair become vacant, or the MSC Chair be unable or unqualified to serve, the position shall be filled by appointment at the discretion of the President with the majority consent of the Board of Directors. In this case, the replacement MSC Chair would remain an Ex Officio member of the board until the next meeting of the Association when he or she will be considered for confirmation.

Section 1.3.4 — Recall

The MSC Chair may be recalled at any meeting of the Board of Directors by a three-quarters vote of the board members present.

In the event of recall of the MSC Chair, a replacement shall be immediately installed in accordance with Article V, Section 1.3.3.”; be it further

RESOLVED that EMRA shall adopt the following changes to the EMRA bylaws:

“

Article VI Representative Council

Section 1 — Composition of the Representative Council

The Representative Council shall consist of resident, and medical student members.

Section 1.1 — Residency Program Representative

Each emergency medicine residency program recognized by the Association will be allocated one residency program representative. Program representatives should be elected or appointed for one-year terms by their peers. Credentialed representatives are allotted one vote for each EMRA member at their residency program as of thirty days prior to the meeting of the Representative Council.

Section 1.2 — Medical Student Representatives

The Chair of the EMRA Medical Student Council (MSC) will be allocated one vote for every twenty-five EMRA medical student members as of thirty days prior to the meeting of the

Representative Council. If the MSC Chair is unavailable, he or she may select an alternate MSC Member to vote on behalf of EMRA's student members.

Section 1.3 — Verification

All representatives shall be verified by the Speaker of the Representative Council at least thirty days prior to the scheduled meeting. No representative shall be seated who is not a member of the Association. No member of the Board of Directors may simultaneously serve as a [residency program or fellow](#) representative to the Representative Council.”

Discussion:

Although there was significant discussion on this resolution, majority of it was in favor of adoption, with fewer, but strong dissenting opinions. Supporting voices revolved around the core tenet that medical students deserved greater equity given they contribute 25% of EMRA membership. The prominent dissenting opinion cited the lack of clinical experience and understanding had by medical students as reason enough to not be able to fully appreciate and fulfill the role of a voting EMRA board member.

Resolution S18-5: Fellow Voting Rights

Recommendation to adopt.

Text:

Resolved, to change EMRA's bylaws as follows (additions in [blue](#), subtractions in [red](#):

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ARTICLE VI REPRESENTATIVE COUNCIL

Section 1 — Composition of the Representative Council

The Representative Council shall consist of resident, [fellow](#), and medical student members.

Section 1.1 — Residency Program Representative

Each emergency medicine residency program recognized by the Association will be allocated one residency program representative. Program representatives should be elected or appointed for one-year terms by their peers. Credentialed representatives are allotted one vote for each EMRA member at their residency program [and associated fellowship programs](#) as of thirty days prior to the meeting of the Representative Council.

Section 1.2 — Medical Student Representatives

The Chair of the EMRA Medical Student Council (MSC) will be allocated one vote for every twenty-five EMRA medical student members as of thirty days prior to the meeting of the Representative Council. If the MSC Chair is unavailable, he or she may select an alternate MSC Member to vote on behalf of EMRA's student members.

Section 1.3 - Fellow Representatives

Fellow members of EMRA attending fellowships which are not associated with residency programs will be allowed to vote as individuals within the representative council.

Section 1.34 — Verification

All representatives shall be verified by the Speaker of the Representative Council at least thirty days prior to the scheduled meeting. No representative shall be seated who is not a member of the Association. No member of the Board of Directors may simultaneously serve as a representative to the Representative Council.

Discussion:

There was no discussion on this resolution.

Resolution S18-3: Membership Resolution

Recommendation to NOT adopt.

Text:

RESOLVED, that EMRA

- amend Article III, Section 2.1.1 and Section 2.2.1 of the EMRA Bylaws to remove the 11 requirement for ACEP membership.
 - References/Relevant EMRA Policy:
 - 14 1. Bylaws of the Emergency Medicine Residents' Association. November 2017.
 - Relevant Policy: EMRA Membership and Bylaws
 - Fiscal Impact: Significant and unknown

Discussion:

The robust discussion on this resolution was overwhelmingly against adopting this resolution.

Reasoning cited included the following:

- EMRA, although associated with ACEP, is an independent organization.
- ACEP provides significant financial and educational resources to EMRA members, as well as opportunities for leadership and mentorship.
- Unnecessary financial hardship for EMRA and its members without a known benefit if the resolution was adopted.