

Bylaws
Duke Regional Advisory Committee

DATE OF RAC APPROVAL: July 16, 1999
Revised: October 23, 2001
Revised: October 25, 2002
Revised: July 5, 2005

**ARTICLE I
NAME and PURPOSE**

Section 1. NAME

This Regional Advisory Committee (RAC) shall be known as: Duke RAC

It shall be comprised of the following North Carolina counties (with partial parts of a county being followed by a “p”) which, all together, shall be referred to in this document as the RAC’s “area”

Durham	Vance	Johnston	Scotland	Columbus	Alamance
Person	Franklin	Wake (p)	Robeson	Richmond(p)	Caswell
Granville	Nash	Lee	Bladen	Warren	

This RAC also includes the following North Carolina hospitals:

Duke University Medical Center	Granville Medical Center
Johnston Memorial Hospital ¹	Durham VA Hospital
Maria Parham Hospital	Raleigh Community Hospital – Duke Health Raleigh
Durham Regional Hospital	Franklin Regional Medical Center
Rex Healthcare	Person County Memorial Hospital ¹
Nash General Hospital	Central Carolina Hospital
Scotland Memorial Hospital	Southeastern Regional Medical Center
Bladen County Hospital	Columbus County Hospital
Sandhills Regional Medical Center	Alamance Regional Medical Center

Highlighted hospitals and counties will be deleted

Additional counties (agencies) and hospitals, outside North Carolina (delete), that are participating in this RAC are as follows:

Counties: Caswell County EMS Highlighted Health Dept. deleted
Warren County EMS
Caswell County Health Department
Durham County Health Department
Franklin County Health Department
Granville/Vance District Health Department
Johnston County Public Health Department
Lee County Health Department
Nash County Public Health Department
Person County Health Department
Robeson County Health Department
Scotland County Health Department
Wake County Human Services/Health Department

Hospitals: Danville Regional Medical Center

Section 2. PURPOSE

The RAC is organized for one or more of the purposes as specified in the Rules and Regulations Governing Ambulance Service and Trauma Systems (refer to Sections .2301 through .2303., North Carolina General Statute 131E-162, 10 NCAC 3D .2000). This purpose shall include regional trauma planning, as well as the establishment and maintenance of a coordinated trauma system with the goal of optimal trauma care for all citizens within the RAC's defined area. The RAC shall also serve to facilitate and participate in Disaster Preparedness efforts across its region.

ARTICLE II GENERAL MEMBERSHIP AND QUALIFICATIONS

Section 1. MEMBERSHIP

- a. The Duke RAC shall consist of the following individuals, at a minimum:
 - (1) The Trauma Medical Director from each Level I and II Trauma Center within the RAC's area;
 - (2) Trauma Nurse Coordinator;
 - (3) One Emergency Physician;
 - (4) Emergency Medical Services Provider Representatives;
 - (5) A hospital representative from each hospital in the RAC's area;
 - (6) One Community Representative; Delete
 - (7) One non-administrative Registered Nurse;
 - (8) One Advanced Life Support Medical Director; and a
 - (9) One LifeFlight Representative
 - (10) A Public Health Department representative from each Public Health Department in the RAC's area.
 - (11) One Trauma Registrar from the Lead Hospital (added)

- b. Additional representation shall include the following:

Representative from the NC Office of Emergency Medical Services

- c. Consideration will be given to any county within the RAC's area that does not include a hospital so as to ensure adequate participation in the work of the RAC.

- d. RAC members may include individuals from other states.

Section 2. MEMBERSHIP AND VOTING PRIVILEGES

a. Membership Privileges

Members who have joined the Duke RAC shall have the right to:

1. Vote as outlined below in (b)
2. Attend all meetings
3. Work on assigned committees and subcommittees
4. Provide input into the decision-making process
5. Recommend members for nomination

b. Voting Privileges

Although the RAC encourages attendance and input at its regular and special meetings from all interested parties, for the purposes of voting, the following rules shall pertain:

Voting members include the following:

- (1) RAC Chair (added)
- (1) Trauma Medical Director (added)
- (1) Trauma Nurse Coordinator (added)
- (1) Public Health Agency representative (added)
- (1) ALS Medical Director
- (2) EMS Representatives
- (1) EMS Physician
- (1) Community Member (delete)
- (1) Non-Administrative RN
- (1) Representative from each Primary RAC Hospital (delete "Primary")
- (1) LifeFlight Representative
- (1) Trauma Registrar (added)

(total of 19 voting members)

c. Conflict of Interest

Good faith. Members shall exercise good faith in all transactions touching upon their duties to the RAC. In their dealings with and on behalf of the RAC, they are each held to a rule of honest and fair dealings between themselves and the RAC. They shall not use their positions as members, or knowledge gained therefrom, to their personal benefit and to the detriment of the RAC.

Exclusion from voting. Any member having a conflict of interest on a matter shall disclose such interest and abstain from voting as appropriate.

Section 3. TERMS OF MEMBERSHIP

a. TERMS

Members shall serve for a two year term. **at which time we will re-evaluate length of terms, and/or rotation of members.** (delete)

b. Removal and Resignation

Any member may resign by giving written notice to the presiding officer of the RAC, to be effective upon receipt or any later date specified in the notice.

The membership shall give consideration to the removal of any member who misses 4 consecutive general meetings.

c. Vacancies

Any vacancy caused by death, resignation, removal or otherwise, of any member shall be filled by the Board of Directors for the remainder of the unexpired term.

ARTICLE III OFFICERS AND DUTIES OF OFFICERS

Section 1. Designation Of Officers

a. Officers

The officers of the Duke RAC shall include the following:

Chair

Vice(delete-change to: Chair-elect

Secretary

Treasurer

These officers shall constitute the Board of Directors for the RAC and may carry out such responsibilities as requested from time to time by the general membership. Such officers shall be representatives of the Duke University Health System or institutions that have chosen the Duke RAC as their administrative RAC. These individuals shall be elected at an annual meeting to be held each year in April.

b. Terms

Officers shall be elected by the voting membership at an annual meeting and shall serve 3 years or shall remain in office until a successor is elected.

c. Removal and Resignation

Any officer may resign by giving written notice to the Board/Chair, to be effective upon receipt or any later date specified in the notice.

d. Vacancies

Any vacancy caused by death, resignation, removal or otherwise of any officer shall be filled by the Board of Directors (Board of Directors, general membership, appointment by Chair etc.) for the remainder of the unexpired term.

Section 2. DUTIES OF THE OFFICERS

The officers shall perform the duties usually performed by such officers and any other duties defined in these bylaws.

**ARTICLE IV
MEETINGS**

Section 1. GENERAL MEETINGS AND NOTICE THEREOF

a. Frequency & Location

State rules require that a general meeting of the RAC be held at least two times per year. This RAC shall meet quarterly or more often if necessary.

Meetings shall be held at Duke University or at such other place as may be designated from time to time by agreement of the membership.

b. Notification

Written or verbal notice of any general meeting shall be given to the voting membership at least ten days prior to the date of the meeting. The date, time and place shall be specified.

c. Minutes

Minutes shall be taken of each meeting.

Section 2. SPECIAL MEETINGS & NOTICE THEREOF

Special meetings of the membership may be called by any designated officer by giving at least five days written or oral notice to the membership. The date, time and place shall be specified.

Section 3. ANNUAL MEETING

The Annual Meeting of the RAC, for the purpose of elections and other business that may arise at that time, shall be held in April.

**ARTICLE V
COMMITTEES**

Section 1. STANDING COMMITTEES

a. Frequency & Notification

Each committee shall meet as often as necessary to perform its duties. Sufficient oral or written notice of the date, time and place of any such meeting shall be given.

b. Types

Initial standing committees shall include the following, with the understanding that additional ones may be added as necessary:

Quality change to Performance Improvement
Education
Legislation
Care Management
Disaster Preparedness/Bioterrorism
Injury Prevention - added

Section 2. STANDING SUBCOMMITTEES

a. Frequency & Notification

Each committee shall meet as often as necessary to perform its duties. Sufficient oral or written notice of the date, time and place of any such meeting shall be given.

b. Types delete this section – this is defined in Section 1b above.

Initial subcommittees shall include the following, with the understanding that additional ones may be added as necessary:

Prevention
Prehospital/emergency medicine
Hospital/acute care
Rehabilitation

c. Minutes change to b.

Minutes shall be taken of each subcommittee meeting.

ARTICLE VI QUORUM

Section 1. Attendance Records

Attendance records shall be maintained for all RAC general, committee and subcommittee meetings.

Section 2. Board of Directors, General, Committee & Subcommittee

a. Board of Directors

For a Board of Directors meeting, a majority of the members shall constitute a quorum, to include the chair or **vice-chair** chair-elect. No action taken at a meeting at which less than a quorum is present is valid unless approved in writing by the absentee members.

b. General Meetings

The majority of the RAC's voting membership shall constitute a quorum for the conduct of business. No action taken at a meeting at which less than a quorum is present is valid unless approved in writing by the absentee members. **See Appendix 1 for Voting Members. (added)**

c. Standing or Sub Committees

A majority of the members shall constitute a quorum. No action taken at a meeting at which less than a quorum is present is valid unless approved in writing by the absentee members.

**ARTICLE VII
CALENDAR/FISCAL YEAR**

For the purpose of data collection, etc. the calendar year of the organization shall be defined as January 1 to December 31.

**ARTICLE VIII
PARLIAMENTARY PROCEDURE**

The rules contained in the Robert's Rules of Order, Revised shall govern meetings of the RAC and its subcommittees in all cases to which they are applicable and in which they are not inconsistent with these Bylaws.

**ARTICLE IX
CONFIDENTIALITY**

All information and proceedings of the Duke RAC are confidential. Knowledge gained at these meetings shall not be used for personal benefit or detriment of the RAC.

**ARTICLE X
AMENDMENTS TO BYLAWS**

These bylaws may be amended at any annual or general meeting by a 2/3 vote of those required for a quorum, provided the proposed amendments have been sent to all members at least ten days before the meeting.

**ARTICLE XI
ADOPTION OF BYLAWS**

We, the undersigned, representing the membership of the Duke RAC consent to and adopt the foregoing bylaws as the bylaws of this organization.

SIGNATURES:

Presiding Officer	(Dr. Steve N. Vaslef, Chairman)	7/16/99
	_____	_____
	(Name) (Title)	(Date)

OR

Members, Board of Directors:		
(Dr. Bruce Whitman, Vice-chairman)		7/16/99
	_____	_____
	(Name) (Title)	(Date)

(Claudia McCormick, RN, Secretary/Treasurer)		7/16/99
	_____	_____
	(Name) (Title)	(Date)

Add the following:

Current Officers:

Chair: Dr. Bruce Whitman		01/28/05
	_____	_____
	(Name) (Title)	(Date)

Chair-Elect: Dr. Mark Sebastian		04/22/05
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Secretary/Treasurer: Claudia McCormick, RN, MSN		
	_____	_____
	(Name) (Title)	(Date)

	_____	_____
	(Name) (Title)	(Date)

