



Metrolina Healthcare Preparedness Coalition

BY-LAWS

ORGANIZATION

The name of this organization shall be called Metrolina Healthcare Preparedness Coalition

MISSION

The mission of the Metrolina Healthcare Preparedness Coalition is to facilitate coordination and cooperation throughout the Metrolina region to ensure partners have the capability and capacity to mitigate against, prepare for, respond to, and recover from emergent health and medical events.

PURPOSE

1. To coordinate the emergency preparedness efforts of its members across the region to enhance the likelihood of an effective and efficient response in a disaster.
2. To coordinate medical and health response activities and services during a disaster.
3. Foster communication between local, regional, and state entities on a community wide emergency planning and response.
4. Ensure overall readiness through the coordination of community wide training and exercise related to medical and health issues.
5. Promote preparedness in the healthcare community through use of efficient and effective standardized practices and integration of medical and health capabilities elements with other partner resources
6. Develop and manage the Assistant Secretary for Preparedness and Response (ASPR) Healthcare Preparedness Program (HPP) grant in a fiscally prudent manner in order to meet the APSR Healthcare Capabilities and other Department of Health and Human Services requirements germane to health and medical preparedness.
7. Maintain resources and assets of the MHPC HPP program and MTAC SMAT II

MEMBERSHIP

Section A. Membership to the Metrolina Healthcare Preparedness Coalition is based on the following:

1. Essential Partners: Hospitals and other healthcare providers, EMS Systems, Public Health, Long Term Care facilities and Emergency Management Agencies, Public Safety, mental and behavioral health providers, private entities associated with healthcare, specialty service providers, support service providers, primary care providers, community health centers, tribal entities, federal entities and MHPC Coordinator (Coordinator) based in the Metrolina region;
2. Law enforcement, fire departments, schools, social services, public works, transportation services, etc.;
3. Regional agencies who would assist in a medical and health response to a disaster are invited to participate as non-voting members. This would include behavioral health agencies, Red Cross or any volunteer agencies or schools and colleges;
4. Healthcare and Emergency Management planning regions and associations that support healthcare preparedness. (i.e. Urban Area Security Initiative (UASI), NCEM Domestic Preparedness Regions (DPR), Public Health Preparedness & Response Regional Representatives, NC Association of EMS Administrators, NC Hospital Association, NC Emergency Management Association, NC Association - Long Term Care, NC Assisted Living Association, NC Law Enforcement Officers' Association, etc.)
5. Any state agency (i.e. NC Department of Public Safety – Emergency Management, NC Office of EMS, NC Hospital Association, NC Public Health) who would assist in the planning or response may be included as non-voting members.

Each entity shall designate a primary and secondary representative.

Section B. Membership Responsibilities

1. Provide representation at coalition meetings and activities and ensure attendance to a minimum of 75% of regularly scheduled meetings.
2. Participate in collaborative regional planning efforts.
3. Participate in the development of surge capacity plans, inter-organizational agreements, and collaborative emergency response plans.
4. Contribute to meeting coalition priorities, goals, and contractual deliverables.
5. Vote on questions placed before the membership
6. Respond to regional emergencies and disasters in collaboration with other members, as available.
7. Participate in sub-committees and workgroups as requested by members and organized under the umbrella of the coalition.

Section C: Contact List

A contact list of member organizations will be maintained by MHPC staff and updated bi-annually. This contact will be published with the agenda of the coalition meeting and will be housed on the secure pages of the MHPC website (<http://www.metrolinapreparedness.org>)

Section D. Voting Privileges

Although the MHPC encourages consensus, at times votes will be required. For the purposes of voting, the following rules shall apply:

- For general business, all member agency or facility will be vested with one vote. Only one vote per organization will count.
- ASPR HPP Grant Approval: Essential Partners in Membership Section A1 will be vested with one vote per agency or facility.

Electronic Voting –MHPC voting may be conducted in an electronic format. Only one vote from each agency or organization will be counted toward the results. The electronic voting will remain open for a minimum of three (3) business days.

Section E. Conflict of Interest

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

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

Section F. Conflict Resolution

It is essential that all members maintain a high standard of discernment, discretion, and good judgment in relationships with MHPC members. All matters should be discussed with mutual respect and a desire to benefit the Coalition. Conflicts within the Coalition or with Steering Committee Members shall involve a meeting of the Steering Committee and relevant members. Ample time will be allowed for presentation of concern and discussion of differing viewpoints. Concerns will be weighed according to reasonableness and fairness.

The desired outcome is a consensual resolution. If after a reasonable amount of time, a resolution cannot be found, the final decision will be made by the Steering Committee with a 75% consensus of members. The decisions will be binding.

Section G. The following Hospitals, EMS Systems, and Public Health are listed for MHPC Region

County	Hospital	EMS	Public Health
Anson	Carolinas HealthCare System Anson	Anson EMS	Anson Public Health
Burke	Carolinas HealthCare System Blue Ridge-Morganton Carolinas HealthCare System Blue Ridge-Valdese	Burke EMS	Burke Public Health
Cabarrus	Carolinas HealthCare System Northeast	Cabarrus EMS	Cabarrus Health Alliance
Catawba	Catawba Valley Medical Center	Catawba EMS	Catawba Public Health

Cleveland	Carolinas HealthCare System Cleveland Carolinas HealthCare System Kings Mountain	Cleveland EMS	Cleveland Public Health
Gaston	Caromont Regional Medical Center	Gaston EMS	Gaston Public Health
Iredell	Lake Norman Regional Medical Center	N/A	Iredell Public Health
Lincoln	Carolinas HealthCare System Lincoln	Lincoln EMS	Lincoln Public Health
Mecklenburg	Carolinas Medical Center CMC – Mercy Carolinas HealthCare System Pineville Carolinas HealthCare System University Carolinas Healthcare System Novant Health Charlotte Novant Health Huntersville Novant Health Matthews	Mecklenburg EMS	Mecklenburg Public Health
Richmond	Sand Hills Regional Hospital	N/A	Richmond Public Health
Scotland	Scotland Hospital	Scotland EMS	Scotland Public Health
Stanly	Stanly Regional Medical Center	Stanly EMS	Stanly Public Health
Union	Carolinas HealthCare System Union	Union EMS	Union Public Health

Section G. There are no membership dues.

Section H. Terms of Membership

1. There are no limits on membership terms.
2. Any member may resign by giving notice to the Chair or Coordinator of the Coalition to be effective upon date of receipt or other date specified in notice.
3. Members who breach conflict of interest/ confidentiality may be removed by a majority vote of the members present. The issue would be brought to the Steering Committee for consideration by the full membership.

OFFICERS

Officers shall include

- Chair
- Vice-Chair

These positions will be elected by the Steering Committee and will serve the function for both.

MEETINGS

Section A.

Meetings are held quarterly. Each meeting is announced by email one month, then two weeks in advance of the meeting. In the case of a special meeting, such notice will state the purpose of the meeting and will be sent five (5) business days in advance. Additional MHPC sub-committees meet as needed determined by the MHPC Regional Healthcare Preparedness Coordinator and/or MHPC Steering Committee.

Section B.

The ASPR Grant Application requires recipients of funding to send a representative to the quarterly meetings. Attendance will be monitored at MHPC meetings and other HPC related meetings and voting members or designees shall maintain a minimum of a 75% attendance record at both the MHPC and sub committee meetings to be eligible for ASPR funding per steering committee discretion.

SUB-COMMITTEES

Section A. The following standing sub-committees have been established.

1. Steering Committee
2. Exercise/ Education Committee
3. Other sub-committees as needed

Section B. Each committee shall be tasked with assignments based on the needs of the Region and directives outlined in the “Scope of Work” for the Regional Healthcare Preparedness Coordinator or as determined by the Steering Committee.

Section C. The Regional Healthcare Preparedness Coordinator and/ or the Steering Committee shall appoint sub-committees to address the needs of the Region.

PARLIAMENTARY PROCEDURE

Section A. The members present, physically or via use of telephone or web-based communication, at any properly announced meeting will be considered a quorum. All issues to be voted upon will be decided by a simple majority of those present at the meeting or by electronic voting unless otherwise specified in the bylaws.

AMENDMENTS

Section A. These By-Laws may be amended at any properly announced meeting by two-thirds (2/3) vote of those present and voting or by electronic voting as specified in the bylaws.

Mark Lamphiaer – Gaston EMS
Steering Committee Chair

Noreen Minoque – CHS Lincoln
Steering Committee Vice Chair
