



Midcoast Public Health Council Bylaws Revised December 13, 2016

Article I. Legislative Purpose, Composition and Mission

- §1. The Midcoast Public Health Council is the District Coordinating Council (DCC) for Public Health, established under Title 22 MRS §412, and is a representative district body of public health stakeholders for collaborative public health planning and coordination.
- §2. The Council includes representation from the Counties of Knox, Lincoln, Sagadahoc and Waldo, and the towns of Brunswick and Harpswell.
- §3. The Midcoast Public Health Council shall:
1. Participate as appropriate in district-level activities to help ensure the state public health system in each district is ready and maintained for accreditation;
 2. Ensure that the essential public health services and resources are provided for in each district in the most efficient, effective, and evidence-based manner possible; and,
 3. Assist the Maine Center for Disease Control and Prevention in planning for the essential public health services and resources to be provided in each district and across the State in the most efficient, effective, and evidence-based manner possible.

Article II. Council Role and Structure

§1. Council Role

1. The Council is responsible for providing overarching guidance and setting policy regarding activities that support the purpose and mission. In addition, the Council:
 - A. Elects Steering Committee members;
 - B. Approves the work plan and District Public Health Improvement Plan (DPHIP);
 - C. Votes on changes to bylaws as needed;
 - D. Approves creation of ad-hoc and standing committees; and,

- E. Provides advice and feedback to the Statewide Coordinating Council for Public Health and the Maine Center for Disease Control and Prevention (Maine CDC).

§2. Council Size

Ideally, the Council is comprised of between twenty-five (25) and forty (40) voting members.

§3. Council Members

1. Membership in the Council is sector-based, with an assurance of geographic representation. With the exception of the optional members listed below, Council membership shall be drawn from, but not limited, to the following sectors:
 - A. Maine Center for Disease Control and Prevention
 - B. County governments
 - C. Municipal governments
 - D. Tribes and other minority groups
 - E. City health departments
 - F. Local health officers
 - G. Hospitals
 - H. Health systems
 - I. Emergency management agencies
 - J. Emergency Medical Services
 - K. Comprehensive Community Health Coalitions
 - L. School districts
 - M. Institutions of higher education
 - N. Health care providers
 - O. Clinics and community health centers
 - P. Voluntary health organizations;
 - Q. Family planning organizations
 - R. Area agencies on aging
 - S. Mental health services
 - T. Substance abuse services
 - U. Organizations seeking to improve environmental health
 - V. Other community-based organizations

2. (Optional):
 - A. Water Districts
 - B. Home health providers
 - C. Health professions training
 - D. Community Action Partners (CAP) agencies
 - E. Immigrant/refugee organization
 - F. Disability services
 - G. Health policy services
 - H. Island health providers
 - I. Other
3. Council members shall demonstrate an interest in and commitment to public health, have the capacity for district-level decision-making, and the ability to share critical information with their sector peers.

§4. Alternate Members

At the time of appointment, each Council member shall designate an alternate to serve with full voting privileges in order to ensure that the Council is able to reach quorum if the primary Council member is unable to attend meetings, participate in voting, or otherwise carry out membership responsibilities.

§5. Interested Parties and Stakeholders

Stakeholders and interested parties are encouraged to attend and participate in all Council meetings, but do not have voting privileges.

§6. Council Members Selection

1. The Steering Committee shall conduct a biannual gap-analysis to review membership of the Council. Results of the gap analysis shall be shared with the Council and a call for member nominations shall be conducted. Nominees shall be geographically representative of the district.
2. Nominees shall be approved at the first meeting of each calendar year by a simple majority vote. The Council may vote on vacancies that occur between gap-analysis meetings.

§7. Council Terms

1. A Council member's term of office is three (3) years and may be renewed by the mutual consent of the member and the Council. A member may serve an unlimited number of terms. All vacancies must be filled for the balance of the unexpired term in the same manner as the original appointment.

2. A Council member may resign from the Council by written notice to the Steering Committee.
3. A Council Member must complete a Membership Agreement form and participate at a minimum 3/4 of full Council meetings in a calendar year. Members who satisfy these terms are eligible to participate in decision making on Council related decisions.
4. A Council member may be removed at the discretion of a two-thirds (2/3) vote of the Council members.

§8. Council Member Responsibilities

1. Members shall regularly attend meetings of the Council, and meetings of the Steering Committee and/or committees to which they are appointed. If unable to attend full Council meetings, members will be represented by their alternate, if applicable.
2. As the sector representative to the Council, to the extent possible, each Council member shall routinely communicate decisions, discussions, and business of the Council to the member's sector/geography, and likewise communicate sector/geography information back to the Council.

Article III. Steering Committee and Council Officers

§1. Steering Committee Role

1. The Steering Committee:
 - A. Provides leadership to the Council;
 - B. Ensures continuity and decision-making concerning Council activities (e.g., establishing agendas; scheduling Council meetings);
 - C. Appoints committee chairs; and,
 - D. Investigates complaints regarding activities of the Council or its members in the course of their role on the Council.

§2. Steering Committee Membership

1. The Steering Committee is composed of at least six (6) members elected by, and from, the full Council and the Maine Center for Disease Control and Prevention District Liaison.
2. The Council will establish, by Council-approved written policy, the composition of the Steering Committee.
3. Officers
 - A. At a minimum, the Council shall elect a Chair, Vice Chair, and a representative to the Statewide Coordinating Council for Public Health. Additional officer positions may be created at the discretion of the Council. The Steering Committee, through the Chair, will convene regularly scheduled Council meetings.

- B. The Chair shall:
 - 1. Preside at Council and Steering Committee meetings;
 - 2. Provide leadership in preparing agendas for Council and Steering Committee meetings;
 - 3. Provide guidance and support to appointed committees; and,
 - 4. Serve as the Alternate Representative to the Statewide Coordinating Council for Public Health.
 - C. The Vice Chair shall:
 - 1. Convene regularly scheduled Council and Steering Committee meetings and preside at Council and Steering Committee meetings in the absence, or at the request, of the Chair; and,
 - 2. Chair special ad hoc committees as designated by the Chair.
 - D. The Representative to the Statewide Coordinating Council for Public Health shall:
 - 1. Ensure that the Council is represented at the State Coordinating Council;
 - 2. Report to the Statewide Coordinating Council on district matters, and report back to the Steering Committee and Council on Statewide Coordinating Council proceedings.
 - E. The Chair, or his or her designee, shall serve as the Alternate Representative to the Statewide Coordinating Council and carry out these duties if the Statewide Coordinating Council Representative is unable to do so.
- 4. The Steering Committee members shall, if circumstances warrant, issue a finance report to the Council at each regular meeting, and shall work with the Council's fiscal agent(s) to remain abreast of financial activities.
 - 5. The Steering Committee members shall ensure that accurate records are maintained of Council actions, adequate notice is sent regarding Council meetings, and maintain records of active membership for purposes of establishing quorum.

§3. Election of Officers

- 1. The membership process established (Article II, Section 6) shall be used to develop a list of nominees for Council officers.
- 2. Nominees shall be approved at the first Council meeting of the year by a simple majority vote.
- 3. The Council may vote on vacancies that occur between meetings.

§4. Council and Steering Committee Terms

- 1. Council Officer terms are two years and may be renewed by Council vote.
 - A. During the first year, Council terms will be staggered by one and two years.
 - B. The Council Chair and one Steering Committee member shall be the odd terms (1 year).

- C. The Vice Chair, second Steering Committee member, and Representative to the State Coordinating Council shall be the even terms (2 years).
2. The Maine Center for Disease Control and Prevention District Liaison is a permanent member of the Steering Committee.

§5. Steering Committee Responsibilities

1. Members shall regularly attend meetings of the Council and meetings of the Steering Committee.
2. At least one member of the Steering Committee member will serve on each of the Council's committees and/or workgroups.
3. In cooperation with the Council Chair, the Maine Center for Disease Control and Prevention District Liaison shall be responsible for Council communications.
 - A. Any public comment shall be coordinated with the Chair with respect for potential conflicts.
 - B. The Steering Committee, in cooperation with the State Coordinating Council for Public Health, shall develop policies regarding public communication.

§6. Steering Committee Meetings

1. The Steering Committee shall meet on a regular schedule that it deems necessary and appropriate in order to fulfill its responsibilities as set forth in the Bylaws.
2. Notice of all regular Steering Committee meetings shall be communicated via electronic mail to all members of the Steering Committee at least five days prior to the meeting.
3. Special or emergency meetings of the Steering Committee may be called as needed by the Steering Committee Chair or Vice Chair. Notice of special or emergency meetings shall be sent to Steering Committee members via electronic mail with as much notice as possible.

Article IV. Council Meetings

§1. Time and Place of Meetings

1. The Council will meet, at a minimum, quarterly.
2. The Steering Committee shall determine meeting times and locations of all Council meetings.

§2. Agenda

The Steering Committee shall prepare an agenda of items requiring Council action, and shall add items of business as may be requested by Council members.

§3. Notice

1. Council members shall be sent electronic mail notice of the time and date of the meetings in accordance with the Council-approved policy and procedure.

2. In the event of an emergency, the Steering Committee may call a meeting with a simple majority vote of the Steering Committee and shall give as much notice as possible.

§4. Rules of Order

1. Parliamentary procedure shall govern regular Council meetings.
2. Council meetings are open to all interested parties.

§5. Council Meeting Minutes

1. The responsibility of Council minutes rests with the Steering Committee members.
2. Minutes recording all motions and subsequent action including the number of yeas, nays, or abstentions shall be recorded.
3. Minutes of all meetings shall be maintained and made available on the Council website.

§6. Quorum

1. A majority of the Council members appointed and currently serving constitutes a quorum for all purposes and no decision of the Council may be made without a quorum present.
2. A majority vote of those present and voting is required for Council action.

§7. Voting and Consensus

1. Each Council member shall have one vote, once quorum is established.
2. As the district-wide representative body for collaborative planning and decision-making for public health, the Council will seek consensus through well-structured and staged processes. If a consensus decision cannot be reached, all business conducted with a simple majority vote of the quorum shall stand as official action of the Council.
3. By formal agreement of the Council, voting may be conducted electronically.

Article V. Committees

§1. Committee Creation

1. The Council or its Steering Committee shall have the power to create standing and ad-hoc committees and workgroups.
2. Committees created by the Steering Committee between Council meetings shall be voted upon at the next scheduled meeting of the Council.
3. The Council Chair, in coordination with the Steering Committee, shall appoint committee members, charge each committee with its responsibilities, and appoint the chair of the committee.

§2. Committee Membership

1. Membership on a committee or workgroup, with the exception of the Steering Committee, is not limited to (voting) members of the Council.
2. The Council, Steering Committee, and other committees may call on non-Council members as advisors to provide information and guidance.
3. At least one member of the Steering Committee will serve on each of the Council's committees and workgroups.
4. Committee Chairs shall bring proposed activities to the Council for discussion and approval. The Council may accept recommendations of committees/workgroups as part of a consent agenda; however, if any Council member finds that he/she has a significant issue with a committee/workgroup recommendation, he/she shall say so at the Council meeting and bring it for further discussion and separate vote at the Council level.

§3. Standing Committees

Standing committees and workgroups may be established by the Council or its Steering Committee.

§4. Committee Chairs

1. The Committee Chair shall be responsible for:
 - A. Scheduling meetings,
 - B. Assigning specific tasks within the mandate of the committee, and
 - C. Reporting to the Steering Committee and the Council concerning the work of the committee.

Article VI. Non-partisan Activities

The Council shall be non-partisan. No part of the activities of the Council shall consist of the publication or distribution of materials or statements with the purposes of attempting to influence or intervene in any political campaign on behalf of or in opposition to any candidate for public office.

Article VII. Conflict of Interest

§1. A conflict of interest is defined as any personal or organizational financial or other interest which prevents or appears to prevent an impartial action or decision on the part of a Council member. A conflict occurs when a financial or other interest could:

1. Significantly impair the individual's objectivity.
2. Create an unfair competitive advantage for any person or organization.

3. Provide a direct or indirect fiduciary interest of financial gain for that individual or organization.
4. Should a matter before the Council present a potential conflict of interest, Council members are required to disclose such potential conflict to the Steering Committee at the earliest point possible. A member with a declared conflict of interest may then participate in discussions regarding the matter, but may not participate in formal decision-making or votes pertaining to it.

Article VIII. Fiscal Agent

The Council shall designate a fiscal agent. The Council and fiscal agent shall enter into an agreement that is documented and designates the roles and responsibilities of both organizations.

Article IX. Operations and Fiscal Calendar

The operations calendar of the Council is the calendar year. The fiscal year of the Council may additionally follow the fiscal year calendar designated in any funding program the Council receives.

Article X. Reporting

The Council will submit quarterly progress reports to the State Coordinating Council for Public Health according to the State Coordinating Council's format. The quarterly reports will be sent to the Council membership and interested parties, and posted on the State Coordinating Council for Public Health website.

Article XI. Bylaws Amendments

§1. This District Coordinating Council for Public Health Bylaws document serves as uniform guidance in all Public Health Districts. To address specific district needs, districts may draft additional addendums in the following areas:

1. Council mission and vision
2. Additional membership requirements to:
 - A. Have at least one member who is a recognized content expert in each of the essential public health services
 - B. Have representation from populations in the State facing health disparities
 - C. Council Standing Committee structure
 - D. Policies that help instruct the function of the Council

§2. The Council may amend these bylaws. Before consideration, the amendment must be submitted in writing to the Council and posted on the Council agenda according to the guidelines in Article IV., Section 3 (Notice). Prior to an amendment of the bylaws, the Council may request a

recommendation from the Steering Committee. Votes to approve bylaws amendments follow the guidelines set forth in Article IV, Section 6 (Quorum), and Section 7 (Voting).

§3. A bylaws amendment proposed by the Council must be submitted to the Chair of the Statewide Coordinating Council for Public Health and the Director of the Maine Center for Disease Control and Prevention for approval before going to vote at a Council meeting. Any bylaws amendments proposed to the Council by the Statewide Coordinating Council for Public Health must be considered for vote at the next scheduled Council meeting.

It is recommended that the Steering Committee for the Council review the Council Bylaws every three (3) years. The Statewide Coordinating Council for Public Health will establish a mechanism annually for the Council to submit revisions for consideration.

Adopted this ____ day of _____, 2017.

Signed this ____ day of _____, 2017.

Midcoast Public Health Council Chair, acting on behalf of
Midcoast Public Health Council:

Statewide Coordinating Council Chair, acting on behalf of
Statewide Coordinating Council for Public Health:

Director, Maine Center for Disease Control and Prevention,
acting on behalf of the Maine Center for Disease Control
and Prevention:
