



Worcester Healthy Baby Collaborative

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Operating Principles

MISSION: The Worcester Healthy Baby Collaborative is a diverse coalition of Maternal and Child Health Leaders who seek to improve health outcomes for babies and their families by engaging and working collaboratively with the community to reduce health inequities, so that Worcester's infant mortality rate is decreased and every baby and family can thrive and prosper.

VISION: We value

- passion for our work
- interdisciplinary partnership
- community engagement (by/of/for)
- addressing and improving health equity
- gathering and analyzing data

ARTICLE I: MEMBERSHIP

I.1 STRUCTURE: The WHBC will be facilitated by a Chair and Vice-Chair, with assistance from an executive steering committee (as described below).

The WHBC is composed of individuals, activists and representatives, acting on their own and/or for institutions, organizations, and coalitions committed to working together to advance the goals and objectives developed by the WHBC. (See Options for Participation chart below).

I.2 How one becomes a member: The WHBC is open to everyone interested in joining. A membership form can be found on the website or by obtaining a hard copy at quarterly meetings. New members are encouraged to use the table in I.3 to determine their desired level of involvement, and to begin attending meetings as noted above.

I.3 Options for Participation:

Responsibilities	Steering Committee	Members	Subcommittee Co-Chairs	Community Friends
Contribute resources (staff, funds, time or other relevant in-kind support) to implement activities related to one or more objectives	X	X	X	
Commit to participate in one or more work groups or subcommittees for one year.	X	X	X	
Determine annual objectives and milestones to accomplish WHBC goals	X		X	
Identify and recruit partners to support objectives and related strategies/activities	X	X	X	
Coordinate and oversee the implementation of strategies specific to the objectives	X		X	
Report progress on the objectives to the full group on an annual basis	X		X	
Participate in decision making that requires voting	X		X	
Participate in monthly steering meetings of the WHBC	X		X	
Participate in quarterly full collaborative meetings	X	X	X	X
Allow the use of partner's organization name and/or logo on documents related to the WHBC	X	X	X	
Receive quarterly updates on activities of the WHBC through quarterly meetings and electronic communications.	X	X	X	X
Attend the annual Infant Mortality Summit	X	X	X	X

ARTICLE II: GOVERNANCE

II.1 Steering Committee: The Steering Committee consists of the Chair and Vice Chair of the WHBC as well as the Co-Chairs of all functioning Subcommittees, and at least one representative of Worcester Division of Public Health. Steering Committee members will be voted in at one of the quarterly meetings designated for elections on a biennial basis. Steering Committee Members will serve two year terms that are renewable. The Steering Committee is responsible for the overall governance of the WHBC as well as providing access or connection to resources to assure the mission of the Coalition is sustained.

The Steering Committee assumes the following duties and responsibilities:

- Recruitment for WHBC members
- Review of contact and distribution list for WHBC
- Write annual City Council Report on Infant Mortality
- Give input to and provide sponsorship of community events (round table, film screening, panel etc)
- Attend Steering Committee meetings (members should attend at least 75% of meetings)
- Summarize priority area and subcommittee meetings and providing support needs for strategies
- Represent the WHBC at community events (or designate a Subcommittee or Supporting Member to do so)
- Oversee the organizational structure developed to sustain WHBC
- Review the goals and outcomes of each of the annual strategic goals to assure they are on track
- Develop and implement a sustainability plan to continue/expand future efforts.
- Provide all necessary guidance and direction to staff, consultants, subcommittees and partners.
- Represent (with Chair and/or ViceChair) at the Worcester CHA and CHIP meetings to promote alignment to keep infant mortality at the forefront of Worcester's public health efforts
- Assist in applying for, managing , and reporting of grant opportunities and deliverables.
- Steering Committee Members will be required to serve on a minimum of 1 subcommittee and will be responsible for reporting back to the steering committee on that group or subcommittee
- Plan and facilitate an annual infant mortality summit.
- Plan and facilitate a biannual strategic planning meeting.

II.2 WHBC Chairpersons: The Chair and Vice-Chair will represent across all sectors including government, non-profit, grassroots, faith based, etc.. These two positions represent the WHBC when called upon to do so. Co-Chairs are nominated by the Steering Committee and voted upon by the full WHBC membership every two years at one of the quarterly meetings and are asked to commit to a minimum, two year, rotating term that can be renewed via the biennial election. Prior

to election as Chair or Vice Chair of the WHBC, the nominee must have served on the Steering Committee for at least one year.

Replacement of Chairs: In the event that a Chair or Vice Chair resigns or is unable to fulfill their duties , the Steering Committee may recommend a qualified replacement to serve out the remainder of that term.

Duties of the Chair/Vice-Chair:

- 1) Attend all steering committee and quarterly WHBC meetings
 - a) Facilitate quarterly WHBC meetings
- 2) Working with steering committee and Vice-Chair, set annual schedule for meetings by November 1 of preceding year
- 3) Present to City Council/health subcommittees about IM/WHBC when requested
- 4) Lead steering committee to plan and facilitate WHBC quarterly meetings
- 5) Communicate with subcommittee chairs about their regular work, and provide strategic assistance as needed
- 6) Represent WHBC as requested (or provide designee) at local, regional, and statewide events
- 7) Plan and facilitate annual Infant Mortality Summit
- 8) Plan and execute biennial strategic planning meeting
- 9) Work with steering committee to use action steps from above meetings to develop and execute strategic goals
- 10) Supervise administrative assistant through AHC program
- 11) Supervise medical and nursing students working with WHBC programs
- 12) Write/present annual report of WHBC projects/goals to WHBC quarterly meeting and/or IM Summit and/or City Council
- 13) Identify potential grants and assist with writing applications
- 14) Work with fiscal agent about financial issues (donations, monthly financial reports)
- 15) Work with steering committee to plan for capacity building
- 16) Review/finalize meeting minutes
- 17) Represent (with Steering Committee Member(s)) at the Worcester CHA and CHIP meetings to promote alignment to keep infant mortality at the forefront of Worcester's public health efforts

II.3 General Membership: General membership of the WHBC is open to all individuals who wish to participate. It will be comprised of both the Steering Committee, Subcommittee Co-Chairs, and Members. We also offer the category of Community Friends for those who wish to remain aware of our activities through mailings and invitation to the quarterly and annual meetings.

ARTICLE III: SUBCOMMITTEES

III.1 Subcommittees Structure

(*For description see addendum. This list can change based on need and work plans.)

Participation in subcommittees is an expected part of WHBC membership. Each subcommittee is charged with developing a yearly targeted action work plan that aligns with the overall mission and vision of the WHBC. This includes setting priorities and providing support and guidance to implement the targeted subcommittee work plans.

III.2 Subcommittee Chairs: These are chosen by members of the subcommittee and must be Steering Committee members. Chairs are expected to attend all subcommittee meetings and work with the WHBC Chair, Vice Chair, and administrative support to prepare agendas and materials for WHBC meetings. Subcommittees raise issues and concerns to the full WHBC for vetting and/or voting. Subcommittee meetings are called by the Subcommittee Co-Chairs. The Subcommittee Co-Chairs determine the dates, times, locations and frequency of meetings. Facilitative support is provided by the WHBC administrative assistance staff at all meetings.

ARTICLE IV: MEETINGS

All quarterly and annual WHBC meetings are open to anyone and all are encouraged to attend. A calendar of WHBC meetings will be made available electronically and at all WHBC meetings. Regularly scheduled meetings occur as follows:

Section 1: General Meetings

General meetings are in person and take place quarterly. One of these meetings (usually in September or October) will be defined as the Annual Infant Mortality Summit Meeting. At this time, when appropriate, election of officers and steering committee members will take place. The agenda will be developed by the Steering Committee and will include Subcommittee reporting, requests for support, group trainings, and other items necessary to build the capacity of the WHBC.

Section 2: Steering Committee

Steering Committee will meet once a month during the months of no quarterly meeting. This meeting will alternate between in person and conference call meetings. The agenda will be set by the Co-Chairs and will include a report from subcommittees and planning for the next quarterly meeting/following up on previous quarterly meeting.

Section 3: Subcommittee Meetings

Subcommittee meetings occur monthly or bimonthly depending on community needs and at the discretion of the Subcommittee Chairpersons or Steering Committee when appropriate.

Meeting Minutes:

All meetings of the WHBC will publish their minutes on the website and electronically to Members.

ARTICLE V: DECISION MAKING

V.1 Decision-making: Decisions are made by active participation in meetings through discussion and by consensus. When consensus is not achieved, voting will take place. This is determined by a 2/3 majority of those voting (Steering Committee and Full Members) members that are present.

V.2 Election Process. On a biennial basis, there will be elections for the above positions at one of the quarterly meetings to be designated at least 3 months in advance. All WHBC members (but not community friends) will have one vote. Voting will be done anonymously and results announced by the end of that quarterly meeting. In the event of a tie, we will discuss a process to involve all interested members in ongoing leadership.

ARTICLE VI: ADMINISTRATION

VI.1 Administration: The WHBC will be provided technical assistance through interns in the Academic Health Collaborative with assistance by the Worcester Division of Public Health/Healthy Greater Worcester.

The AHC intern under the supervision of either the Chair or the Vice Chair will be responsible for supporting WHBC activities, which include drafting agendas with the Chair and Vice Chair, collecting materials necessary for WHBC activities, taking minutes at meetings, and communication with WHBC members to facilitate participation and provide access to information.

VI.2 Funding: The WHBC will seek funding to implement the activities detailed in the Principles of Operation and supporting subcommittee work plans.. To that end, the WHBC will seek funding to build its capacity, seeking to collaborate with and support other agencies in seeking funds that align with direct service delivery of the work plans .

ARTICLE VII: GENERAL

VII.1 Conflict of Interest: All conflicts of interest must be disclosed to the General Membership. If there is a specific funding issue that represents a conflict of interest, then there will be a process to document this and discuss options with the Steering Committee and through the signing of a Conflicts of Interest form, which can be found in the addendum to this document. When needed, members will review possible conflicts of interest for funding opportunities and criteria for supporting grant applications of other entities.

VII.2 Amending Principles of Operation: These Operating Principles will be reviewed biannually, prior to the election of the Chair and Vice Chair and may be altered, amended or repealed as necessary through a recommendation by the Steering Committee, by consensus or by vote.

APPENDIX A

Subcommittees:

Data

The charge of the Data subcommittee is to collect and analyze annual data about infant deaths to Worcester city residents. This group should also coordinate with state DPH and the local Division of Public Health for state-level statistics and other public health data pertinent to WHBC.

Governance

The charge of the governance subcommittee is to review past organizational structure of the WHBC and propose revised operating principles for approval by the general WHBC.

Baby Box

The charge of the Baby Box subcommittee is to coordinate and integrate efforts by the UMass Medical School and various partner agencies to fulfill the goals of the Remillard Family Grant in 2018 and to plan for expansion beyond this in subsequent years.

Communication

The charge of the Communication subcommittee is to coordinate the WHBC's website, Facebook page, dissemination of written reports/minutes, and informing all members of upcoming meetings and agendas.

Ad Hoc

The Steering Committee may choose to develop additional subcommittees to perform specific projects for the WHBC as needed.

Appendix B:

Conflict of Interest Policy

Article I **Purpose**

The purpose of the conflict of interest policy is to protect the WHBC's interest when it is contemplating entering into a transaction or arrangement that might benefit the private interest of a coalition member, or might result in a possible excess benefit transaction. This policy is intended to supplement but not replace any applicable state and federal laws governing conflict of interest applicable to nonprofit and charitable organizations.

Article II **Definitions**

1. Interested Person - Any coalition member with voting power, who has a direct or indirect financial interest, as defined below.
2. Financial Interest - A person has financial interest if the person has directly or indirectly, through business, investment, or family:
 - a. An ownership or investment interest in any entity with which the coalition has a transaction or arrangement,
 - b. A compensation agreement with the coalition or with any entity or individual with which the coalition has a transaction or arrangement,
 - c. A potential ownership or investment interest in, or compensation agreement with, any entity or individual with which the coalition is negotiating a transaction or arrangement.
3. Compensation - Includes direct and indirect remuneration as well as gifts or favors that are not insubstantial.

*A financial interest is not necessarily a conflict of interest. (See Article III, Section 2)

Article III **Procedures**

1. Duty to Disclose - In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the directors and members of committees with governing board delegated powers considering the proposed transaction or arrangement.
2. Determining Whether a Conflict of Interest Exists - After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest

is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.

3. Procedures for Addressing the Conflict of Interest

- a. An interested person may make a presentation at the governing board or committee meeting, but after the presentation he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest.
- b. The chairperson(s) of the governing board or committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement.
- c. After exercising due diligence, the governing board or committee shall determine whether the coalition can obtain with reasonable efforts a more advantageous transaction or arrangement for a person or entity that would not give rise to a conflict of interest.
- d. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the governing board or committee shall determine by a majority vote of the disinterested committee members whether the transaction or arrangement is in the coalition's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination it shall make its decision as to whether to enter into the transaction or arrangement.

4. Violations of the Conflicts of Interest Policy

- a. If the governing board or committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.
- b. If, after hearing the member's response and making further investigation as warranted by the circumstances, the governing board or committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

Conflict of Interest Statement

1. Name: _____ Date: _____

2. Position: _____

3. Are you a voting member? YES NO

4. I affirm the following:

I have received a copy of the WHBC's Conflict of Interest Policy _____(initial)

I read and understand the policy _____(initial)

I agree to comply with the policy _____(initial)

5. Disclosures:

Do you have any financial interest (current or potential) including a compensation arrangement , as defined, in the conflict of interest policy with the WHBC.

YES NO

If YES please describe:

By signing, I attest that the contents of this document are true.

Signature of Member

Date

Reviewed by:_____