

ARTICLE I**Purposes of the Corporation**

Section 1.01. Purposes. The Public Health Practice Council (Practice Council) is organized as a method for connecting academia and public health practice from across the State of Nebraska.

Mission

Establish and enhance shared partnerships between academic and practice-based partners in Nebraska in an effort to build and sustain channels for interaction and increase the capacity of each to improve the public's health.

Guiding Principle

A guiding principle of this council is to hold shared power and build trust among all partners.

Goal

Through collaborative efforts of academic and practice communities, the Council will provide a forum for discussion and planning, and will offer recommendations for educating and training Nebraska's public health workforce.

Strategies

The specific strategies of this Council are to:

- Continually assess the current and future education and training needs of Nebraska's public health workforce. (focus in year 1)
- Encourage and promote the development and delivery of education and training programs to address needs and priorities of the public health workforce. (focus in year 1)
- Leverage resources to build and sustain the public health workforce.
- Identify and address specific opportunities and barriers to collaboration with state, tribal and national public health initiatives.
- Encourage and assist with public health workforce recruitment and retention.
- Encourage and advocate for cultural competence, awareness, and diversity in the public health workforce.
- Advise the HRSA-funded Great Plains Public Health Training Center (Great Plains PHTC).

ARTICLE II**Meeting Space and Administrative Support.**

Section 2.01. Meeting Space. The principle meeting space of the Public Health Practice Council shall be held at the University of Nebraska Medical Center College of Public Health (COPH) in the Maurer Center for Public Health.

Section 2.02. Administrative Support. The COPH will provide administrative support to the Practice Council by scheduling meetings, handling logistics support (room scheduling, etc.) and taking meeting minutes. Alongside the Chairs, the COPH will also assist in Practice Council communications.

ARTICLE III

Members

Section 3.01. Members. The Practice Council is an autonomous body made up of a strategic mix of members from across the state of Nebraska representing academic and practice-based public health professionals.

No more than 25 persons shall participate as voting members of the Council at a given time.

Preferred members may include, but are not limited to, the following:

- No more than one voting representative from each academic partner:
 - UNMC COPH
 - Creighton
 - UNO (HPER or Public Administration.)
- Up to two representatives from the state department of public health (at least one from the Office of Health Disparities and Health Equity).
- Up to two representatives from local public health departments (at least one rural)
- Up to two Tribal Health Directors or their designee from each of the 4 tribal entities in Nebraska, or representatives/designees.
- One representative from a local Board of Health
- One representative from the Public Health Association of Nebraska (PHAN)
- One representative from the Health Center Association of Nebraska (HCAN)
- One clinician representative (nurse, MD, dentist, etc.)
- Representative from other University of Nebraska campuses
- Representative of the state college system
- Representative of the community college system
- Representative of the Area Health Education Centers (AHECs)
- Representative of Foundations/philanthropy in Nebraska
- Representation from the student body, one urban and one from rural area
- Other public health Practice-based non-profits and associations

The Practice Council will strive to bring diversity to the membership (e.g. geographically, professionally, racially and ethnically). Members of the legislature may attend and/or supply the Council with information and advice, but will not have a vote on the Council. Non-voting advisors may attend the meetings as well.

Section 3.02. Member Terms. Members will serve a term of 3 years. An individual may serve up to 2 consecutive terms. Terms may change in the future as the council becomes more established.

Section 3.03. Member Roles and Responsibilities. Individuals are expected to participate in 75% of the meetings of the full Council and appointed committees. The Executive Committee or committees chairs will contact those members who miss two consecutive meetings. If meetings are missed for 1 year consecutively, the member will be automatically released from service on the Council.

Additional roles and responsibilities include:

- Persons on the Council represent the voice of the organization(s) for which they work or serve first, and personal/individual interests second.

- Persons of the Council are expected to offer advice, monitor, and strengthen programs and services that will improve capacity and improve the health of Nebraskans.
- Persons of the Council are expected to respond to emails and requests from the council coordinator.

Section 3.04. Ex Officio Membership. Staff providing logistical support will serve as ex officio members of the Council. Additional ex officio members may include Faculty and professional staff from Academic campuses or organizations for which there is already a voting member present. Ex officio members may actively participate in meeting discussions, but do not vote on Practice Council decisions. If ex officio members participate on committees, they may vote on committee matters and recommendations.

Section 3.05. Vacancies. Vacancies shall be filled by the Practice Council on a case-by-case basis, based on a recommendation (that meet the needs of the council) from the Council officers and vote from the full membership.

Section 3.06. Removal of Members. A member may be removed by a majority vote of the Practice Council, at any regularly scheduled or special meeting based on in-adherence to the 75% participation rule, or any other scenario in which the participant places the work of the Practice Council in jeopardy.

ARTICLE IV

Meetings and Decision-Making Processes

Section 4.01. Quorum. Fifty-one percent (51%) of the membership present shall constitute a quorum for the transaction of business. If a quorum is present at the commencement of a meeting, a quorum shall be deemed present throughout such proceedings. Quorum shall include members who attend both in person and via distance technologies.

Section 4.02. Voting. Each member shall have one vote. All voting at meetings shall be done personally and no proxy shall be allowed. Voting results shall be based on majority rule (51% of those voting).

Robert's Rules of Order (motion, discussion, vote) will be used for voting processes.

Voting may be done in person, via distance technologies, or via online survey.

If Quorum is not present at a Practice Council meeting, all motions will be deferred to vote by the membership via email and/or online surveying. The minutes of the meeting and the discussion points of the motion will be included with the online voting format.

If there is a tie vote, it will be broken by a second vote of the executive committee.

Section 4.03. Meetings of the Practice Council. The Practice council shall hold at least 4 meetings per year. Members may attend either in person or via distance technologies. At least one meeting per year will be designed to engage all members in an in-person format.

Section 4.04. Compensation. Costs of travel (i.e. mileage) will be reimbursed for Council members through the Great Plains Public Health Training Center, according to government travel rates, if funding is available.

Section 4.04. Absence. Each Member is expected to notify the Practice Council Chairs and/or staff support of any anticipated absence.

ARTICLE V

Committees

Section 5.01. Committees of the Practice Council. The Practice Council, by resolution adopted by a majority of the members, may designate and appoint one or more committees to carry out the goals and work of the Practice Council.

Each member will be asked to serve on at least one committee per year.

Section 5.02. Executive Committee. Between meetings of the Practice Council, on-going oversight of the affairs of the Practice Council may be conducted by an Executive Committee, the membership of which shall include two Co-Chairs and two at-large representatives. This committee will have at least 2 meetings per year, and others as needed.

The Executive Committee is responsible for setting Practice Council agendas, assuring completion of goals and objectives, running meetings, and engaging Council members in the work.

Section 5.03. Governance Committee. The Governance Committee will be comprised of one at-large Executive Committee member to serve as Committee Chair, and will be responsible for nominations and elections process for Executive Committee members, nominations and acceptance process for new Practice Council members, and adjustment of by laws as needed.

Section 5.04. Other Committees and Task Forces. The Practice Council may create and appoint members to such other committees and task forces as they shall deem appropriate. Such committees and task forces shall have the power and duties designated by the Board of Directors, and shall give advice and make non-binding recommendations to the Board.

Section 5.05. Term of Office. Each member of a committee shall serve for one calendar year and until a successor is appointed, unless the committee is sooner dissolved. The term limits of the chair for the first term is three years, subsequent terms are two years, with re-elections every two years.

Section 5.06. Vacancies. Vacancies in the membership of committees may be filled by the Chairs of the Practice Council, striving for inclusiveness and diversity at all times.

Section 5.07. Rules. Each committee and task force may adopt rules for its meetings not inconsistent with these by laws or with any rules adopted by the Practice Council.

ARTICLE VI**Officers**

Section 6.01. Officers. The Practice Council shall elect two Chairs and three At-Large representatives to serve on the Executive Committee.

One Chair shall represent academic public health interests in Nebraska; one chair shall represent Practice-Based public health interests in Nebraska

Section 6.02. Term of Office. Officers shall be elected for two or three year terms. Vacancies may be filled or new offices created and filled at any meeting of the Board. Each officer shall hold office until a successor shall have been duly elected or appointed and qualified.

Section 6.03. Removal. Any officer may be removed from office by a majority vote of the Practice Council whenever in the Members' judgment the best interests of the Practice Council will be served.

Section 6.04. Resignation from Office. Officers may resign at any time by providing written notice to the Chairs.

Section 6.05. Powers and Duties. The powers and duties of the officers of the Public Health Practice Council shall be as follows:

- *Chairs.* The Chairs shall preside at the meetings of the Practice Council. The Chair shall play a major role in reaching the goals of the Practice Council and in representing the council within and outside the community.
- *At-Large Representatives.* In case of the absence of the Chair, or of her/his inability from any cause to act, the At-Large representatives shall perform the duties of that office. The At-Large representatives are also responsible for leading the Practice Council in meeting its intended goals.

ARTICLE VII**Miscellaneous**

Section 7.01. Fiscal Year. The fiscal year of the corporation shall be the calendar year.

Section 7.02. Amendment of Articles and By Laws. The by-laws of the Practice Council may be adopted, amended, or repealed by a majority vote of the members, provided that at least ten days written notice has been given each member of the Board of the intention to adopt, amend, or repeal the by-laws.