

Preamble

The Central Michigan Regional Rural Health Network's (the Health Network's) mission is to work collectively to improve the health of and promote wellness among the community members in the central Michigan region. The vision is for a strengthened health care system with expanded access to healthcare services.

The Health Network includes health care providers, academic institutions that offer health professions programs, health and social needs organizations, and additional stakeholders. Expanding upon efforts of the Together We Can health improvement initiative started in 2010, the Health Network was created in June 2015 under a grant provided by the Health Resources and Services Administration Office of Rural Health Policy to the Central Michigan District Health Department (CMDHD) which serves as the Lead Network Member.

In working together to accomplish our mission and objectives, the principles and rules contained herein will guide the decisions, procedures and actions of the team so that we can accomplish our work effectively and constructively, and with respect to the rights of all team members and those with which we work in the community. This operating agreement has been agreed upon by the Health Network Members, and all Members will be expected to adhere to this agreement.

Membership

Membership in the Health Network is open to any entity or individual willing to commit to achieving the Health Network's mission and vision, fulfilling Network Member responsibilities, abiding by the Code of Conduct, and adhering to the Core Values. New Members may join the Health Network by providing an email to the Lead Health Network Member (CMDHD) acknowledging agreement to abide by terms and conditions of this Operating Agreement and providing the following information.

- Organization name and address, including for headquarters and any satellite location.
- Organization's type (i.e., community health center, hospital, educational institution, not for profit social services organization, etc.).
- Employee ID Number (EIN).
- A description of the organization, including role in the health care and/or social services systems, number of locations and the cities in which the organization is located, types and number of employees, etc. for inclusion in the Health Network Directory.



- The name, including credentials; title; email address; and phone number of the key person (technical lead) from the organization who will be participating in Health Network activities and the same information for the contractual point of contact if he/she is different from the technical lead.
- Information as to whether both the technical and contractual leads should be included on the Health Network contact list used for Network communications, as well as the name, title, phone number, and email address for any additional representatives to be included in the contact list.

Health Network Member Representative Roles and Responsibilities

- Participating in the Health Network's meetings and events.
- Volunteering to serve as a member of the Governance Committee, Health Network subcommittees, and/or ad hoc planning and workgroups when possible.
- Being well informed about rural health network planning project activities, including reviewing materials provided by the Lead Rural Health Network Member.
- Providing constructive verbal and written input regarding perceived community and health care needs and for programmatic/operational activities, as well as recruitment of additional Central Michigan Regional Rural Health Network Members, via the methods and tools provided by the Lead Health Network Member.
- Participating in decision making processes to identify the Central Michigan Regional Rural Health Network Members goals, objectives, and activities.
- Adhering to any Health Network operating policies and procedures.
- Positively representing and promoting the Central Michigan Regional Rural Health Network and its programs to peers, stakeholders, other organizations, individuals, and the public.
- Informing the Lead Rural Health Network Member via email regarding any changes in the Member's organizational information (technical/contractual points of contact, address, etc.).
- Informing the Lead Rural Health Network Member regarding any concerns or issues and/or conflicts of interest.



Lead Health Network Member Additional Roles and Responsibilities

- Health Network management and administration.
- Providing staff and necessary material support, including processes, methods, and tools, to facilitate Health Network meetings and activities, including providing a facilitator and meeting recording mechanisms.
- Providing access for Network Members to teleconferencing, electronic meeting, and protected file-sharing/storage applications and maintaining the Health Network website.
- Preparation and dissemination of Health Network information and materials.
- Serving as the Health Network fiscal agent, and providing Health Network financial management and administration, including but not limited to providing quarterly financial reports to the Finance/Administration Subcommittee.

Meetings

Member representatives are encouraged to attend at least 75% of the monthly meetings per year. Member representatives are allowed to designate an alternate representative from their organization to attend the meetings. Member representatives may attend in person or via the electronic meeting system. The Lead Health Network Member will be responsible for distributing meeting invitations via email no less than 1 week prior to each meeting and for developing the meeting agendas which will be distributed no less than 2 days before the each meeting. At each Health Network meeting, the Chairperson of the Executive Committee will report Governance Committee activities and decisions. Voice/video recordings of the Health Network meetings will be placed on the Health Network website within 1 week following the conclusion of each meeting.

The Health Network meetings are usually scheduled on the first Thursday of each month at the Clare/Gladwin Regional Education Service District (RESD) Administration Building located at 4041 E. Mannsiding Rd, Clare, MI 48617 from 10:00 a.m. to 11:00 a.m. Prior to Health Network meeting, the Health Governance Committee meets from 9:00 a.m. to 10:00 a.m. The Governance Committee is responsible for reviewing the meeting location, dates, and times as necessary and approving changes.

In case of inclement weather or any other events resulting in all day closure of the Clare-Gladwin RESD Administration Building, the Governance Committee and Health Network meetings will be cancelled. In case of Administration Building, "late starts" (in which the building is opened at 9:30 a.m., the Governance Committee meeting will be cancelled, but the



Health Network meetings will take place at the 10:00 a.m. Closure/late start information may be obtained by calling 989.386.3851 extension 8484.

Power and Authority of Central Michigan Regional Rural Health Network and Governance Structure

The Health Network's activities and actions are advisory in nature and in all cases are subject to final approval by the Lead Health Network Member. The Health Network will be governed by a Governance Committee consisting of not less than 12 and not more than 18 members that meets on a monthly basis facilitated by the Executive Committee which includes a Chairperson, a Vice Chairperson, a Treasurer, and a Secretary elected by the Governance Committee on an annual basis in January. Subcommittees include Finance/Sustainability, Administrative/Rules, Legislative, Outreach/Communications, and Operations/Technical. Additional permanent and ad hoc subcommittees can be formed as deemed necessary by the Governance Committee and Subcommittees can include community members and additional stakeholders who are not Health Network Members as long as the non-Health Network Members do not comprise the majority. The Governance Committee will meet on a monthly basis with the minutes of the meeting to be distributed by the Secretary or designated representative no more than 2 weeks following each meeting.

Quorum/Voting

The Health Network does not mandate that a pre-defined number of people (or quorum) be present to conduct a meeting and/or make decisions. All decisions are made by consensus of the majority of those present at the meeting where the decision is made, with any dissenting votes noted.

Conflict of Interest

No Health Network Member representative will participate in a decision of the Health Network if he/she had a direct personal interest, wherein he/she may financially or materially gain from the action of the Health Network.

Amendment

The Governance Committee Health Network may by majority vote amend the governance structure of the Health Network and the Operating Agreement so as to conduct Health Network activities in the most productive and efficient manner. Changes in the Operating Agreement suggested by the Administrative/Rules Subcommittee will be circulated to the Governance Committee no less than 2 weeks before the Governance Committee meets to approve the changes. Following approval of the revisions, the revised Operating Agreement will be distributed via email with a "read receipt" to the designated Health Network Technical and Contractual Leads by the Health Network Secretary.



Central Michigan Regional Rural Health Network Operating Agreement Attachment A: Code of Conduct

Code of Conduct

In working together to accomplish our mission and objectives, these principles and rules of behavior will guide the decisions, procedures, and actions of the Central Michigan Regional Rural Health Network (the Health Network) Member representatives so that we can accomplish our work effectively and constructively and with respect to the rights of all team members and those we work with in the community. This code of conduct is a voluntary code, but is one that has been agreed upon by the Health Network Member representatives and to which all members will be expected to adhere.

In all our conduct we affirm that, in addition to adhering to the Core Values, Health Network Members will:

- 1. Be positive, be honest and be respectful.
- 2. Be civil in all our dealings with one another and use civil language.
- 3. Be open-minded and accept other points of view.
- 4. Be able to express our opinions with consideration of others and encourage others to do so.
- 5. Be ethical and act ethically; be unbiased and not let a personal agenda drive the team. We will not hinder the work of the team. Ethical actions include declaring conflicts of interest, obeying laws and legislation that pertain to health information privacy, and acting responsibly and professionally.
- 6. Abide by the provisions of the Central Michigan Regional Rural Health Network operating agreements.
- 7. In both our internal and external communications, recognize what can be shared and what cannot be shared, both externally due to confidentiality and Health Insurance Portability and Accountability Act rules governing the privacy of individual health information and internally with regard to our own discussions and dissemination of drafts versus finalized documents.
- 8. Be here, i.e. attend the Health Network meetings and as part of the team participate fully and meaningfully. If unable to attend we will send, if possible, an alternate who can make decisions in our place.
- 9. Understand our individual role as a member of the Health Network when taking on or assigned to a task or objective.



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- 10. Be realistic about timelines in accomplishing tasks. If unable to meet a deadline or task timeline, ask other Health Network representatives for assistance or extension of the due date.
- 11. Keep our promises once committed to taking on a given task or activity.
- 12. Be goodwill ambassadors for the work and accomplishments of the Health Network and spread the vision, mission, and values of the team to our central Michigan communities and beyond, where possible and appropriate.
- 13. Celebrate and recognize the accomplishments of our Health Network Members and of the organizations and agencies within the central Michigan counties with whom we work.



Central Michigan Regional Rural Health Network Operating Agreement Attachment B: Core Values

Core Values

These core values of the Health Network will constitute our distinction and guide the way we will work together to improve the health of those in the central Michigan region. These core values include:

- **Trust** in our confidence to understand and fulfill the health care needs of our service population by open and honest relationships. We keep our promises to one another, we fulfill our tasks, we rely on one another, and we can openly and honestly discuss our ideas and opinions.
- **Respect and Honor** in our capacity to lead in health care. We respect and honor one another's opinions, beliefs and ideas; we actively listen to one another; provide honest feedback and accept other peoples' values; we are civil and polite to one another, tolerant of others' views, opinions and ideas.
- Accountability for all actions or activities involved in the development and implementation of a quality Health Improvement Plan by seeking to achieve measurable outcomes.
- We value **Diversity** and seek different viewpoints, opinions, and perspectives in our directions to complete our Mission and Vision statements.
- **Transparency** in our actions and in sharing information and our written and articulated health improvement plans.
- **Collaboration** and **Cooperation** with one another and with all members of the community to communicate and solve problems by sharing necessary and relevant information. We foster creativity and new ideas through working together, we share information, and we share tasks.
- **Moral Courage** and **Discipline** to live up to expectations and community needs by our empathetic and collective call to consciousness.
- **Stewardship** is demonstrated by our members by holding people, wellness, and health care as our primary focus. We are always seeking best practices and the most cost effective solutions.
- Adaptability to our changing environments to include culture, media, and service populations.



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- Commitment to working together to unite our communities in health awareness and promotion and dedicated to fulfilling the mission of the Health Network through hard work and discipline. We are committed to living up to the ideals embodied in our vision and mission statements and to our mutually agreed upon operating agreements and the processes and procedures that we will use to undertake our mission.
- We value **Social Equity** by acknowledging and improving the health care needs of all our populations by creating equal access independent of class, wealth, political inclinations, or ability to pay.