

Northwest Community EMS System Advisory Board Charter – 2023

I. **Date originally chartered**

The NWC EMSS Advisory Board was established in 1979. It was the goal of the founders to create a board representing each of the System's constituent groups in order to reflect a diversity of opinion and viewpoints.

II. **PURPOSE/SCOPE**

A. The Northwest Community EMS System Advisory Board exists to provide a multidisciplinary forum for collaborative System leadership.

B. Members provide thoughtful, unbiased, non-partisan input and recommendations to the EMS MD that are considered when making decisions regarding System operations. They create, support, advance, and advocate for policies and position statements that meet or exceed Federal, State, Regional, and local requirements for inclusion in the System's program plan.

C. **Board charges**

1. Participate in creating/affirming the System Mission/Vision/Values statements.
2. Participate in amending/approving the System EMS Strategic Plan.
3. Recommend/endorse language for System policies.
4. Serve as the launching ground for new System initiatives.
5. Gather information from local, regional, state, and national sources to keep the NWC EMSS abreast of new developments as they occur.
6. Assist the System in remaining proactive rather than reactive to change.
7. Serve as a forum for creative, innovative thought leadership where proposals are discussed and debated from each constituent's perspective prior to recommending a course of action.
8. Serve as the Advisory Committee for the NCH Paramedic Program.

III. **MEMBERS and ALTERNATES (See Bylaws)**

A. Members and alternates represent the many disciplines that make up the System including hospital administrators, physicians, hospital EMS Coordinators, Emergency Communications Registered Nurses (ECRN's); fire department chiefs, paramedic officers and non-officers, Provider EMS Coordinators, Private provider reps, EMS faculty, Emergency Medical Dispatchers, Law Enforcement personnel, elected officials and private citizens. The Board also includes representatives from each of the System standing committees including Education, Computer Aided Reporting System (CARS), Provider Based Performance Improvement (PBPI), Cardiac Arrest, Research and Development (R&D), and the Workforce Development and Retention task force. Ex Officio Board members include the EMS MD, EMS Administrative Director, and representatives from Harper College.

B. **Selection and approval of members and alternates**

1. The Board will review and affirm nominees for appointed positions.
2. Existing Board members without a conflict of interest will consider and vote on applications received for elected members and alternates. They shall take into account the applicant's qualifications, years of service, extent of System participation, geographical distribution of members and applicants, and the stated reasons for applying for service on the Board.

C. **Terms:** A Board appointment is for a two-year term. Each member and alternate is eligible to serve for two consecutive terms before they rotate off for one year or apply for a different position (Ex., alternate to member).

IV. **Individual committee member responsibilities**

A. Members/alternates are expected to fulfill the duties of care, disclosure, loyalty, service, and confidentiality during their service to the Board.

B. Serve as a liaison between the System and their representative constituencies.

C. Members/alternates have a duty to disclose actual or possible conflicts of interest on any issued brought to the Board for discussion, debate, or approval.

- D. Become familiar with the Illinois EMS Act, Rules/Regulations, national, state and local standards of practice, and current issues facing EMS Systems/providers in order to make informed decisions/recommendations.
- E. Canvas constituent groups for their opinions and input on matters of importance to EMS. Provide the EMS MD with recommendations that reflect "the will of the people", rather than the opinion of a select few. In so doing, each component of the System is offered a voice and no one group is allowed to dominate

V. **Boundaries**

- A. The Advisory Board shall review and revise its By-laws as needed using the tenets of this charter to give direction and process to the Board's function.
- B. All sensitive or protected information discussed at meetings is to be held strictly confidential.
- C. Representatives shall not bring issues to the board that are agency-specific and could create labor/union conflicts within theirs or another EMS Provider agency.
- D. When policy language is being discussed, members are asked to avoid the perception of personal bias by expressing the consensus position of, and/or anticipated impact on, their constituents.
- E. Final policy approval/implementation is contingent upon approval by the EMS MD. Approval of policies that financially impact providers/hospitals is contingent upon approval by Chiefs/Hospital Administrators and the EMS MD.

VI. **Leadership positions** (See Bylaws):

- A. **Chair:** The Chair shall preside and conduct meetings in accordance with the Board bylaws and agenda. They shall expedite committee business compatible with the rights of all members, respond to inquiries relating to the business of the Board, authenticate by their signature when necessary, all actions and proceedings of the Board, and serve as a liaison to the System in matters pertaining to the Board. The Chair will convene sub-committees or task forces to address specific issues when necessary and recommend additional positions as needed.
- B. **Vice-Chair:** The vice-chair performs such duties as may be requested by the Chair and/or Board. The Vice-chair assumes the Chair's responsibilities if the position is vacant, the Chair is absent, or the Chair leaves the chair for any purpose.
- C. **Secretary:** Recording member of the Board. They shall keep a record of all proceedings of the Board and call the meeting to order in the absence of the Chair and Vice-Chair. The secretary will submit draft minutes to the EMS office for distribution to Board members.

VII. **ATTENDANCE/VOTING POLICIES**

- A. Members are expected to attend all regular and special meetings of the Board unless the absence is reported to and acknowledged by the Chair or EMS Administrative Director as excused in advance of the meeting. If a member cannot be present, they are responsible for providing their alternate with reasonable notice so the alternate can attend. Alternates are encouraged to attend all meetings and to actively participate in all discussions, but may only vote if a member of the discipline they represent is absent.
- B. Voting process/Quorum: 51% of voting members or alternates present

VIII. **Meetings**

- A. Second Thursday of odd numbered months at 9:00 AM at NCH and virtually for those who cannot attend in person. Room location and virtual attendance links shall be forwarded to all members in advance.
- B. Meeting facilitator: Advisory Board chair
- C. Meeting secretary: Elected by the Board
- Minute distribution: Approved minutes shall be posted to the System website
- D. Room/Zoom scheduling: EMS Administrative Secretary