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3 Below you will find the Wisconsin Oral Health Coalition's Rules of Operation. The Rules of
4 Operation describe the leadership and operational structure of the Wisconsin Oral Health
5 Coalition. If you have any questions, comments or suggestions related to the Rules of Operation,
6 please contact Rachael Wolfe at Children's Health Alliance of Wisconsin, (414) 337-4576,
7 rwolfe@chw.org.

8

9 **Rules of Operation**

10 **Section 1. NAME:**

11 This organization will be known as the Wisconsin Oral Health Coalition (WOHC).

12 **Section 2. MISSION:**

13 The Wisconsin Oral Health Coalition, consisting of diverse public and private partnerships, works
14 to create meaningful change to improve oral health and access to care in Wisconsin.

15 **Section 3. WISCONSIN ORAL HEALTH COALITION MEMBERSHIP:**

16 The Wisconsin Oral Health Coalition is comprised of individuals representing themselves and
17 individuals representing institutions, agencies or organizations. All of these individuals share a
18 common interest in oral health and access to care.

19 **Becoming a Member of Wisconsin Oral Health Coalition:**

20 Individuals who are interested in becoming members can apply for membership by completing an
21 application, either [online](#) or by paper. Paper applications should be faxed or scanned to
22 Wisconsin Oral Health Coalition staff. In requesting membership, the individual must provide
23 information indicating:

- 24 • The name of the institution, agency or organization the applicant represents, if any
- 25 • The address, phone number and email through which the applicant can be contacted
- 26 • That the applicant has read and understands the mission and Rules of Operation of the
27 Wisconsin Oral Health Coalition
- 28 • That the applicant has read and agrees to abide by the [Wisconsin Oral Health Coalition](#)
29 [Conflict of Interest Policy](#)

30 Wisconsin Oral Health Coalition staff will process and review all requests for membership and will
31 respond to interested individuals with coalition orientation materials.

32 The steering committee may alter committee membership as necessary, with a majority vote of
33 the steering committee.

34 **Wisconsin Oral Health Coalition Membership Dues:**
35 The Wisconsin Oral Health Coalition does not charge membership dues although contributions
36 are encouraged.

37 **Section 4. STEERING COMMITTEE:**
38 The steering committee will manage overall planning and organizational policy setting for the
39 Wisconsin Oral Health Coalition.

40 **Steering Committee Membership and Elections:**
41 The steering committee's membership will consist of, at a minimum, one representative from
42 each of the following categories: dentist, dental student, dental hygienist, dental hygiene student,
43 public health, dental hygiene education, dental education, advocacy, parent/consumer,
44 community dental health clinics, funding, legislation, medical care and social services. All of the
45 steering committee members, as mentioned above, must be/become members of the Wisconsin
46 Oral Health Coalition. The size of the steering committee shall not be less than seven (7), not
47 including non-voting observers such as Wisconsin Oral Health Coalition staff members, ex-officio
48 members and invited advisors. The steering committee shall consist of no greater than 25
49 members.

50 At its own discretion, the steering committee may invite advisors to attend meetings. These
51 advisors are not members of the steering committee and will not have any rights or
52 responsibilities associated with being a steering committee member.

53 **Steering Committee Membership Terms:**
54 Steering committee members serve for two years, except the positions of Fund Development,
55 Public Health, Prevention/Health Promotion, Dental Student and Dental Hygiene Student. After
56 serving in a given position for two years, the steering committee member is eligible for reelection.
57 There is a two consecutive term limit for steering committee members. This rule does not apply to
58 chair positions. A person who has served as vice-chair or chair may serve on the steering
59 committee for three consecutive terms.

60 Steering committee members serving in the Fund Development, Public Health and
61 Prevention/Health Promotions positions do not have term limits. Steering committee members
62 serving in the dental student position will have a term limit of one year and are eligible for
63 reelection, if he or she will remain a student for the totality of the upcoming year. Steering
64 committee members serving in the dental hygiene student position will have a term limit of one
65 year and are not eligible for reelection.

66 **Student Steering Committee Positions:**
67 The dental student position will be held by a Marquette University School of Dentistry student.
68 Marquette University School of Dentistry will share the application with students. Preference will
69 be given to second and third year dental students. The dental hygiene student position will be
70 held by a student at one of the eight dental hygiene schools in Wisconsin. An application will be
71 sent to all dental hygiene schools. Preference will be given to second year dental hygiene
72 students.

73 **Steering Committee Representative Vacancies:**
74 The Wisconsin Oral Health Coalition membership will be informed of all steering committee
75 vacancies. Any Wisconsin Oral Health Coalition member can apply for membership to the
76 steering committee by submitting a statement of intent and a short biography to the chair of the
77 steering committee. Steering committee members can recommend an individual member of the
78 Wisconsin Oral Health Coalition to fill vacant positions on the steering committee.

79 **Steering Committee Member Resignation or Removal:**

80 When a steering committee member is unable to complete their term, a letter of resignation
81 should be provided to the committee chairperson so that the committee is aware of the upcoming
82 vacancy. Similarly, Wisconsin Oral Health Coalition staff reserves the right to remove inactive
83 members from the steering committee if a member has missed more than 50% of scheduled
84 steering committee meetings.

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86 **Steering Committee Member Responsibilities:**

87 The steering committee sets administrative policies and oversees the general planning for the
88 Wisconsin Oral Health Coalition. Its responsibilities include, but are not limited to:

- 89 • Approving the formation of workgroups
- 90 • Establishing regulations for the administration and operation of the Wisconsin Oral Health
91 Coalition
- 92 • Approving the use of the Wisconsin Oral Health Coalition name and logo
- 93 • Approving fund-generating activities
- 94 • Approving the annual budget
- 95 • Approving staff-related activities
- 96 • Electing a chairperson and vice-chairperson
- 97 • Planning the agenda and activities for the annual meeting
- 98 • Policy development and approval
- 99 • Strategic planning
- 100 • Giving overall direction to Wisconsin Oral Health Coalition efforts and activities
- 101 • Guiding Wisconsin Oral Health Coalition priorities
- 102 • Reporting all coalition activities to the membership at annual meeting

103 **Steering Committee Leadership:**

104 The chairperson of the steering committee will serve as the Chair of the Wisconsin Oral Health
105 Coalition. The chairperson will be elected every two years by a majority vote of the steering
106 committee. The chairperson term will be for two years and may be renewed for a second two year
107 term by majority vote of the steering committee. The chair will preside at all meetings of the
108 steering committee and will facilitate the annual meeting.

109 The Vice-Chairperson of the Steering Committee will serve as the vice-Chair of the Wisconsin
110 Oral Health Coalition. The vice-Chairperson will be elected every two years by a majority vote of
111 the steering committee. The vice-Chairperson term will be for two years. It is the intent that the
112 vice-Chairperson will then transition into the chairperson role for a two-year term which may be
113 renewed for a second two-year term by majority vote of the steering committee.

114 Only current members of the steering committee will be eligible to be elected as chairperson or
115 vice-Chairperson.

116 On behalf of the Wisconsin Oral Health Coalition steering committee, Children's Health Alliance
117 of Wisconsin staff will fulfill the following responsibilities:

- 118 • Manage membership database
- 119 • Record and maintain meeting minutes
- 120 • Provide public relations services
- 121 • Fundraise and manage the budget
- 122 • Coordinate steering committee meetings
- 123 • Coordinate the annual meeting
- 124 • Coordinate legislative activity
- 125 • Maintain regular communication with members

126 At the steering committee's discretion, it may assign other members to coordinate other key
127 functions of the Wisconsin Oral Health Coalition.

128 **Steering Committee Meetings:**

129 The steering committee will meet a minimum of four times each year. Special meetings of the
130 steering committee may be called at any time by the chairperson or at the request of a majority of
131 members of the steering committee. The chairperson or vice-chairperson will preside at all
132 meetings of the steering committee unless the chairperson designates someone else on the
133 steering committee to serve as the facilitator. Agendas and other meeting information are issued
134 via email to steering committee members at least 3 days prior to meetings.

135 **Steering Committee Quorum:**

136 For the purposes of voting, the presence in-person or via conference call of 51% of the voting-
137 eligible steering committee membership will constitute a quorum at any given steering committee
138 meeting. A quorum less than 51% will result in the cancellation of a steering committee meeting.
139 The chair reserves the right to reschedule meetings that do not meet quorum.

140 **Steering Committee Voting:**

141 Decisions will be made by consensus when possible. In the event of inability to reach consensus,
142 the majority vote of the voting-eligible steering committee members attending a meeting will be
143 the action of the committee. Proxy voting will be permitted only when the proposed action has
144 been presented to the steering committee prior to the meeting.

145 **Steering Committee Staff:**

146 The Wisconsin Oral Health Coalition staff members will serve as non-voting ex-officio members of
147 the steering committee.

148 **Section 5. WORKGROUP FORMATION:**

149 In this section, the term workgroup is used in similar context as the term Ad Hoc. The formation of
150 workgroups may be initiated by the steering committee or any other group and must be approved
151 by the steering committee. Preferred workgroup size is 5 members; however, workgroups can be
152 formed with fewer members.

153 **Workgroup Membership:**

154 Any Wisconsin Oral Health Coalition member may participate in a workgroup. It is the
155 responsibility of the workgroup to inform the steering committee which members are active
156 participants in the workgroup. General members may also participate in workgroups by contacting
157 WOHC staff.

158 **Workgroup Responsibilities:**

159 Each workgroup is responsible for:

- 160
- 161 • Developing a plan of activities
 - 162 • Implementing the planned activities
 - 163 • Reporting progress at general membership meetings
 - 164 • Submitting regular notices and updates to the steering committee
 - Obtaining approval from steering committee at large if needed

165 **Workgroup Leadership:**

166 The steering committee will confirm the workgroup chair elected by the workgroup for each of the
167 workgroups formed.

- 168 **Workgroup Accountability:**
169 All workgroups, whether standing or ad hoc, are accountable to the steering committee and
170 ultimately, to the general membership.
- 171 **Workgroup Vacancies:**
172 When a vacancy occurs in positions of committee chair, the standing committee must replace the
173 individual in the vacant position within 60 days.
- 174 **Workgroup Meetings:**
175 Workgroups will hold meetings, with the frequency and location determined by each committee.
176 Notices for these meetings will be sent to all members of each committee via email. Minutes of
177 the committee meetings must be kept and sent to the Wisconsin Oral Health Coalition staff for the
178 official records of the Wisconsin Oral Health Coalition.
- 179 **Workgroup Decision Making:**
180 Each workgroup is authorized to establish its own methods for and rules of decision-making.
181 Standing committees are welcome to use the consensus or quorum and majority rules designated
182 for the steering committee, but they are not required to do so.
- 183 **Section 6. GENERAL MEMBERSHIP ANNUAL MEETINGS:**
184 The Wisconsin Oral Health Coalition will conduct one general membership meeting called the
185 Wisconsin Oral Health Conference. The meeting will include updates and information sharing
186 among the general membership.
- 187 **General Membership Meeting Notice:**
188 Notices for these meetings will be sent to all members no less than 21 days prior to the meeting.
- 189 **General Membership Meeting Agenda:**
190 Creating the agenda for the annual meeting will be the responsibility of the steering committee.
191 All general membership meetings will include progress reports from the workgroups.
- 192 **General Membership Meeting Recording:**
193 Wisconsin Oral Health Coalition staff will be responsible for keeping records of the General
194 Membership Meeting and for disseminating general membership meeting proceedings.
- 195 **Section 7. REPRESENTING THE WISCONSIN ORAL HEALTH COALITION:**
196 It is the responsibility of the Wisconsin Oral Health Coalition chairperson, or chairperson
197 designee, to speak on behalf of and distribute written information about the Wisconsin Oral
198 Health Coalition to the press, government officials and to any other person seeking information
199 about the Wisconsin Oral Health Coalition for official and/or public purposes. No member shall
200 speak on behalf of the Wisconsin Oral Health Coalition without prior approval from the
201 chairperson.
- 202 **Section 8. AMENDMENTS TO THE RULES OF OPERATION:**
203 Recommendations for amendments to the Rules of Operation may arise from the steering
204 committee or from a majority vote at the General Membership Meeting. Such recommendations
205 will be distributed to the general membership 21 days prior to General Membership Meeting for
206 review and comment before final vote by the steering committee. Any approved changes become
207 effective immediately.
- 208 **Section 9. EFFECTIVE DATE OF RULES OF OPERATION:**
209 The Wisconsin Oral Health Coalition Rules of Operation were approved and adopted on February
210 19, 2003. The Rules of Operation may be reviewed and revised as recommended by the

211 Wisconsin Oral Health Coalition steering committee in accordance with the most current adopted
212 Rules of Operation.

213 **Section 10. POLICY STATEMENTS:**

214 **Policy Statement #1**
215 **Committee Meeting Attendance**

216 Policy #1 Approved 4-09-03
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218 As an active member of the Coalition, and as a member of a committee, the member is expected
219 to attend a minimum of 50% of the committee meetings, either in person or via conference call.
220 Commenting to the committee chair regarding the agenda or sending proxy votes on issues
221 identified in the meeting agenda will fulfill the meeting attendance policy.
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223 In the event of member inability to fulfill active membership, it is requested that the member
224 resign their membership from the committee.
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226 The steering committee chair will contact the committee member to clarify the membership intent,
227 if the member does not contact the steering committee chair.
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230 **Policy Statement #2—**
231 **Procedure for Establishing Coalition Policy Statements**

232 Policy #2 approved 4-29-03
233 Revision approved 9-23-04
234 Revision approved 9-15-05

235 The Coalition exists to educate and advocate for improved oral health for all Wisconsin citizens
236 and will recommend changes and program improvements to fulfill its mission:
237

238 **“The Coalition, consisting of diverse public and private partnerships, works to create**
239 **meaningful change to improve oral health and access to care in Wisconsin.”**
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241 The following procedure will be used to establish policy statements that represent the Wisconsin
242 Oral Health Coalition.
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- 244 1. *The Coalition member interested in seeing an improvement in a particular policy or*
245 *programmatic issue will provide a written description of the issue to the steering*
246 *committee chair in order for the issue to be considered. The chair will then include the*
247 *issue on the next steering committee meeting agenda.*
- 248 2. *After discussion, the steering committee chair will recommend that the issue be*
249 *considered by the steering committee in its current form. Approval by a majority of the*
250 *steering committee members will establish the issue as Wisconsin Oral Health Coalition*
251 *policy effective that same day.*
- 252 3. *The steering committee, acting in good faith, will report new policy statements to the*
253 *general membership coalition at the General Membership Annual Meeting.*
- 254 4. *Coalition members are encouraged to use the information provided by the coalition to*
255 *advance their efforts to improve the delivery of oral health services throughout Wisconsin.*
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260 **Policy Statement #3—**
261 **Online Voting on Issues**

262 Policy #3 Approved 4-09-03
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Online surveys will be an acceptable format for voting on issues that are too urgent to wait for steering committee meetings.

The online survey will be sent via Wisconsin Oral Health Coalition staff, which will announce the issue with the day and time deadline for response to the voting.

Votes will be tabulated by name in the minutes of the next steering committee meeting.

Contact Person:

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*Cultural Competence refers to a set of attitudes, skills, behaviors and policies that enable organizations and staff to work effectively in cross-cultural situations. It reflects the ability to acquire and use knowledge of the health-related beliefs, attitudes, practices, and communication patterns of clients and their families to improve services, strengthen programs, increase community participation, and close the gaps in health status among diverse population groups. Cultural competence also focuses attention on population-specific disease prevalence and treatment efficacy. (Provider’s Guide to Quality & Culture, <http://erc.msh.org>)